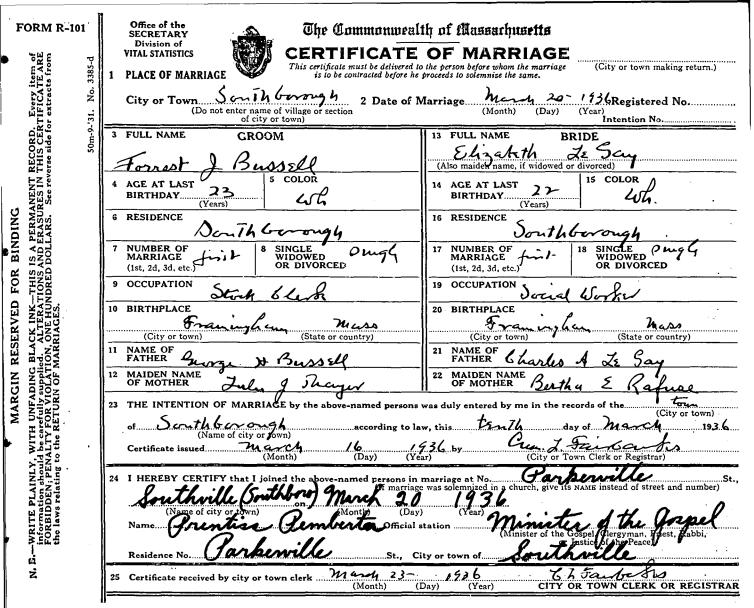
Office of the **FORM R-101** The Commonwealth of Massachusetts SECRETARY Division of CERTIFICATE OF MARRIAGE VITAL STATISTICS (City or town making return.) This certificate must be delivered to the person before whom the marriage PLACE OF MARRIAGE is to be contracted before he proceeds to solemnize the same. of city or town) Intention No..... 3 FULL NAME GROOM 13 FULL NAME BRIDE (Also maiden name, if widowed or divorced) 15 COLOR 14 AGE AT LAST (Years) (Years) RESIDENCE 16 RESIDENCE 7 NUMBER OF SINGLE 17 NUMBER OF MARRIAGE WIDOWED MARRIAGE WIDOWED A OR DIVORCED OR DIVORCED (1st, 2d, 3d, etc.) (1st. 2d. 3d. etc.) 9 OCCUPATION 19 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) 11 NAME OF 21 NAME OF **FATHER** MAIDEN NAME MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the...... RTIFY that I joined the above-named persons in marriage at No..... (If marriage was solemnized in a church, give its NAME instead of street and number) (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)St., City or town of... CITY OR TOWN CLERK OR REGISTRAR



F	ORM R-10	٩	VITAL STATISTICS Division of VITAL STATISTICS CERTIFICATE	th of Massachusetts OF MARRIAGE
	ORD, Every item S CERTIFICATE A side for extracts fro	'31. No. 3385-	1 PLACE OF MARRIAGE is to be contracted before he	Marriage (Month) (Day) (Year) Intention No.
	r RECORD. N THIS CER.	50m-9-	3 FULL NAME GROOM GEL & Pachard 5 COLOR	13 FULL NAME BRIDE Rull Zucill Ulman (Also maiden name, if widowed or divorced)
DING	ERMANENT RASURES IN ARS. See r		4 AGE AT LAST 30 BIRTHDAY (Years) 6 RESIDENCE ALAC Solvey 11. William 6	14 AGE AT LAST BIRTHDAY (Years) 16 RESIDENCE Sonth brough
FOR BINE	THIS IS A PONS AND EIGED DOLL		7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 8 SINGLE D WIDOWED OR DIVORCED DOME OF DIVORCED D	NUMBER OF MARRIAGE WIDOWED OR DIVORCED 18 SINGLE WIDOWED OR DIVORCED
SERVED 1	ICK INK—1 ALTERATI ONE HUND RIAGES.		10 BIRTHPLACE Zencohville Manie (City or town) (State or country)	20 BIRTHPLACE Brook line Muso (City or town) (State or country)
RGIN RES	ADING BLA supplied. TOLATION RN OF MAR		11 NAME OF William Puckard 12 MAIDEN NAME Sutruch Wampler and	21 NAME OF Donglas J Whan as 22 MAIDEN NAME HOMME Flormes & Winch
MAI	y, WITH UNF ald be carefulls NALTY FOR V to the RETUR		of (Name of city or town) Certificate issued (Month) (Day)	w, this trents from the day of March 1936
	RITE PLAINLY formation show ORBIDDEN; PE e laws relating		(Name of city or town) (Month) (Day	e was solemnized in a church, give its NAME instead of street and number)
	yg .g .ag .g .g .g .g .g .g .g .g .g .g .g .g		25 Certificate received by city or town clerk	or Justice of the Peace) or Justice of the Peace)

tem of TEARE to from Sass-d	Office of the SECRETARY Division of VITAL STATISTICS 1 PLACE OF MARRIAGE The Communicatin of Marriage is to be contracted before he proceeds to solemnize the same. (City or town making return.)
Every item of RTIFICATE ARE for extracts from	City or Town 2 Date of Marriage Registered No. (Do not enter name of village or section of city or town) (Month) (Day) (Year) Intention No.
RECORD. I THIS CERTI /erse side for 6 50m-9-'31	3 FULL NAME GROOM 13 FULL NAME BRIDE Carita Cargusta Wild (Also maiden name, if widowedfor divorced)
G TANENT URES IN See re	4 AGE AT LAST 27 S COLOR BIRTHDAY (Years) 15 COLOR BIRTHDAY (Years) 15 COLOR BIRTHDAY (Years) 15 COLOR BIRTHDAY (Years) 16 RESIDENCE
BINDIN IS A PERN IND ERASI DOLLARS	Douthborough 7 NUMBER OF MARRIAGE Juit 8 SINGLE WIDOWED Dungy 17 NUMBER OF Juit 18 SINGLE WIDOWED DUNGY MARRIAGE Juit 18 SINGLE WIDOWED DUNGY
D FOR	(1st, 2d, 3d, etc.) 9 OCCUPATION Chical Work 10 BIRTHPLACE OR DIVORCED (1st, 2d, 3d, etc.) OR DIVORCED 19 OCCUPATION 20 BIRTHPLACE 20 BIRTHPLACE 20 BIRTHPLACE
SERVEI ACK INK ALTER 4, ONE HI RRIAGES	10 BIRTHPLACE 20 BIRTHPLACE Maldy Mass (City or town) (State or country) (City or town) (State or country) 11 NAME OF (21 NAME OF) (22 NAME OF) (33
GIN RE. DING BL. Supplied. OLATION N OF MAR	12 MAIDEN NAME OF MOTHER Chartie & Helliard FATHER arting ton augustin Wilds 12 MAIDEN NAME OF MOTHER Chart & Helliard 13 MAIDEN NAME OF MOTHER anita G Ma Meil
MARA , WITH UNFA ild be carefully NALTY FOR VI to the RETURI	23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or town) of South brough according to law, this first day of 1936 (Name of city of town) Certificate issued (Month) (Day) (Year) (City or Town Clerk or Registrar)
.—WRITE PLAINLY information shou FORBIDDEN; PEI the laws relating	24 I HEREBY CERTIFY that I joined the above-named persons in marriage at the St. Market Church (If marriage was solemnized in a church, give its NAME instead of street and number) Southborough (Month) (Day) (Vear) Name (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Beace) Residence No. St. City or town of Southborough
ă Ż	25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAF

Office of the **FORM R-101** The Commonwealth of Massachusetts SECRETARY Division of CERTIFICATE OF MARRIAGE VITAL STATISTICS This certificate must be delivered to the person before whom the marriage (City or town making return.) PLACE OF MARRIAGE is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage Registered No. (Do not enter name of village or section (Month) (Day) of city or town) Intention No..... 3 FULL NAME GROOM 13 FULL NAME BRIDE (Also maiden name, if widowed or divorced) 15 COLOR AGE AT LAST 14 AGE AT LAST BIRTHDAY..... (Years) RESIDENCE 16 RESIDENCE 7 NUMBER OF SINGLE 17 NUMBER OF SINGLE WIDOWED MARRIAGE WIDOWED MARRIAGE OR DIVORCED OR DIVORCED (1st, 2d, 3d, etc.) (1st. 2d. 3d. etc.) 9 OCCUPATION 19 OCCUPATION 10 BIRTHPLACE BIRTHPLACE (City or town) (City or town) (State or country) 11 NAME OF 21 NAME OF FATHER 12 MAIDEN NAME MAIDEN NAME OF MOTHER OF MOTHER THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the...... (City or Town Clerk or Registrar) ERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church, give its NAME instead of street and number) (Minister of the Gospel, Clergyman, Priest, Rabbi, Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

I hereby certify that the above marriage record is correct to the best of my knowledge and fielief.

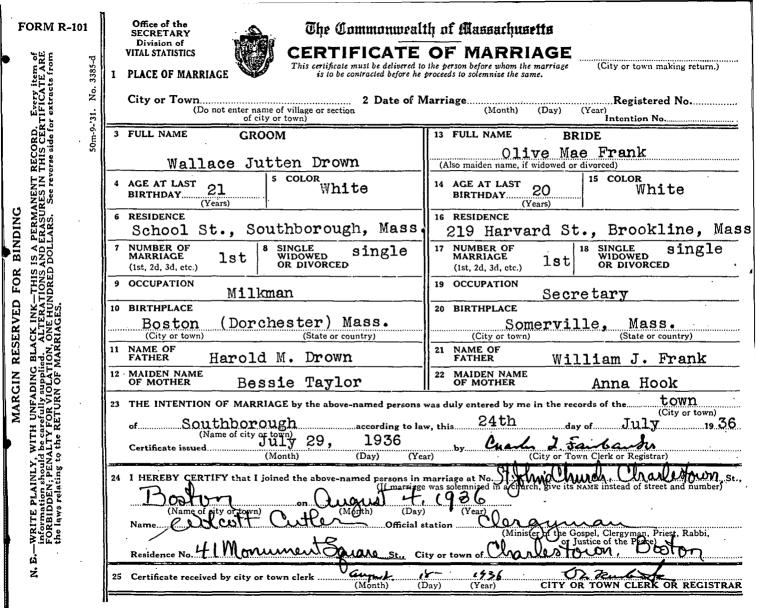
Clerk of Cyster, N. N. Date July 7, 1936

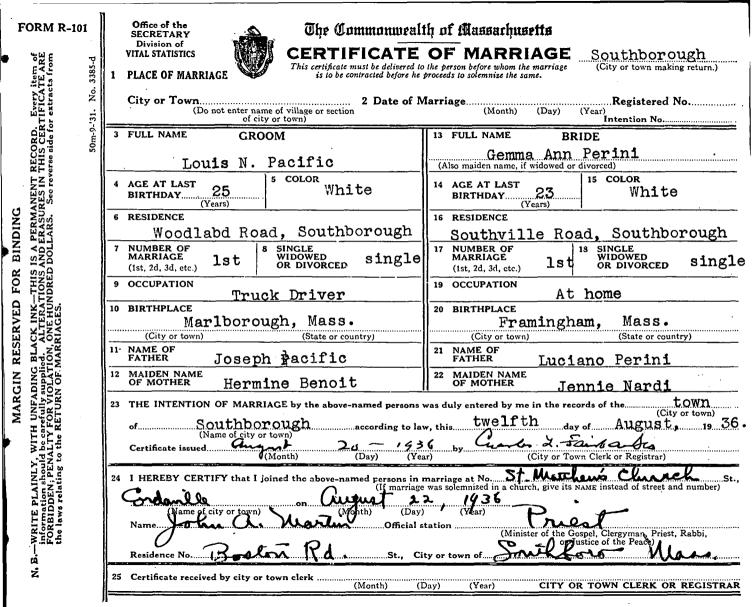
[&]quot;If deceased, give age at death.

Groom Henry George Stevens Bride ... Esther Winifred Misener. Residence of Groom Hopkinton, Mass. Bride Southboro, Mass. Age of Groom 3.7...... Bride......29 Color of GroomW.• Bride..... Occupation of Groom... Mechanic Bride At home " Birthplace of Groom Boston, Mass. Bride Southboro, Mass. No. of Marriage of Groom 1st..... Bride Lst. Groom Widowed or Divorced..... 46 Bride Intention Filed ... June 26 ... 1936 *By whom Married. Fred. S. Fellowes ... Residence Exeter, N.H. Official Station Justice of the Peace Date of Marriage.... July 6, 1936..... Place Exeter, N.H. *Clergyman or Justice of the Peace. (Record continued over)

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R-103	The Commonweal	th of Massachusetts
for the ich the lerk of lowing.	For the use of Clergyman or	CATE OF MARRIAGE magistrate solemnizing marriage (City or town)
orm is in wh or cl ext fol	II I PLACE OF MARRIAGE	tions on margin) Registered No
This for town gistrar onth	2 DATE OF MARRIAGE(Month) (Day) (Year)	Return of city or town of
ED.	3 FULL NAME GROOM	13 FULL NAME BRIDE
RECOF f the ci to th 7 of th PENA	Sheldon Sherman	(Maiden name, if widowed or divorced)
IGNENT dents of turned atth day DDEN.	4 AGE AT LAST 24 BIRTHDAY Years 5 COLOR While	14 AGE AT LAST 23 Vears 15 COLOR
NDIN ERMA ot resident and re the ter	6 RESIDENCE AT TIME OF Br Marki Selent Don't borney MARRIAGE	16 RESIDENCE AT TIME OF Edmends St., Marlboro Mass
OR BI	7 NUMBER OF WIDOWED, OR DIVORCED	17 NUMBER OF MARRIAGE WIDOWED, OR DIVORCED
FERIS Triag y at O or	9 OCCUPATION Kitchen Worker	19 OCCUPATION Waitres
RVEINK—INK—INK—INK—Ithe mapped and RTIFIC	10 BIRTHPLACE Wilford Mass	20 BIRTHPLACE Edinboro Scotlans
CK J	(City or town) (State or country)	(City or town) (State or country)
RI BLA BLA arties led o	FATHER Slorge Sherman	FATHER John James Doctora
GIN Fig. p. r.	OF MOTHER ada Palmer	OF MOTHER Jame Slass
AR FAD ien ti to b man RES	11	ons was duly entered by me in the records of the city (or town) of
UNN UNN g wh d is the ASU	Certificate issued July 28 according to law,	
TTH inting d, an which	24 To the total Clerk of Authbrough	
Y, Woffic office in Section 1	(City or town) I HEREBY CERTIFY that the foregoing is a true	~ 1 // $< MMonth M (1)av (1$
INL rson solem sown NS NS RED	by PB. Mush	
PLA te pe or t or t INDI	that the persons named therein were joined in marriage by me, a	t No
of the ring city (ER)		Official station
use use the ALT		(Minister of the Gospel, Clergyman Friest, Rabbi, or Justice of the Peace)
. B. -	Residence No. 74 Jenot St. 25 Received by city 4 19) (A S
z ö	or town clerk fully 30	Obtanto REGISTRAR





1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. (City or town making return.)
City or Town 2 Date of Marriage Registered No. (Month) (Day) (Year) (Month) (Day) (Year) Intention No.
3 FULL NAME GROOM A AGE AT LAST BIRTHDAY (Years) 6 RESIDENCE 7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 9 OCCUPATION 10 BIRTHPLACE (City or town) (State or country) 11 NAME OF FATHER FATHER 13 FULL NAME BRIDE (Also maiden name, if widowed or divorced) 14 AGE AT LAST BIRTHDAY (Years) 15 COLOR 16 RESIDENCE 17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 18 SINGLE WIDOWED OR DIVORCED 19 OCCUPATION 10 City or town) (City or town) (City or town) (State or country) 11 NAME OF FATHER 13 FULL NAME BRIDE (Also maiden name, if widowed or divorced) 14 AGE AT LAST BIRTHDAY (Years) 15 COLOR 16 RESIDENCE 17 NUMBER OF MARRIAGE ((Ist, 2d, 3d, etc.)) 18 SINGLE WIDOWED OR DIVORCED OR DIVORCED (City or town) (City or town) (State or country)
12 MAIDEN NAME OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or town) of (Name of city or town) Certificate issued (Month) (Month) (Day) (Year) (City or Town Clerk or Registrar)
24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No Author Many School School (If marriage was solemnized in a church, give its NAMF instead of street and number) (Name of city on town) (Month) (Day) (Year) Name Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) Residence No. 36, Bristol St., City or town of Many St. (Nonth) (Day) (Year) CITY OR TOWN CLERK OR REGISTRA

Every item of RTIFICATE ARE OF extracts from WO 101-2 MW 101-31. No. 3385-d	Office of the SECRETARY Division of VITAL STATISTICS 1 PLACE OF MARRIAGE City or Town. (Do not enter name of village or section of city or town) (Do not enter name of village or section of city or town) (Do not enter name of village or section of city or town) (Do not enter name of village or section of city or town)
CIN RESERVED FOR BINDING LOUNG BLACK INK—THIS IS A PERMANENT RECORD. E Supplied. ALTERATIONS AND ERASURES IN THIS CERTI COLATION, ONE HUNDRED DOLLARS. See reverse side for e N OF MARRIAGES.	3 FULL NAME GROOM 3 FULL NAME GROOM 4 AGE AT LAST S COLOR BIRTHDAY (Years) 6 RESIDENCE 7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 9 OCCUPATION 10 BIRTHPLACE (City or town) 11 NAME OF FATHER 12 MAIDEN NAME OF MOTHER COLOR 13 FULL NAME BRIDE (Also maiden name, if widowed or divorced) 14 AGE AT LAST BIRTHDAY (Years) 15 COLOR BIRTHDAY (Years) 16 RESIDENCE 17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 18 SINCLE WIDOWED OR DIVORCED OR DIVORC
MAR(N. B.—WRITE PLAINLY, WITH UNFA information should be carefully s FORBIDDEN; PENALTY FOR VI the laws relating to the RETURN	THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or town) of (Name of city or town) Certificate issued (Month) (Day) (Year) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church, give its NAME instead of street and number) (Name of city or town) (Month) (Day) (Year) Name (Name of city or town) (Month) (Day) (Year) Name (Name of city or town) (Month) (Day) (Year) St., City or town of (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) St., City or town of (Month) (Day) (Year) Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of RECORD. Every item THIS CERTIFICATE See reverse side for VITAL STATISTICS IFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. 1936 Registered No. City or Town. 2 Date of Marriage... 50m-12-35. (Do not enter name of village or section (Month) (Day) ' (Year) of city or town) Intention No. ... 13 FULL NAME BRIDE 3 FULL NAME **GROOM** if widowed or divorced) (Also maiden name. 5 COLOR 15 COLOR 14 AGE AT LAST Za AGE AT LAST BIRTHDAY..... BIRTHDAY (Years) (Years) 6 RESIDENCE 16 RESIDENCE 81 alyander A. 17 NUMBER OF 7 NUMBER OF WIDOWED OR DIVORCED MARRIAGE OR DIVORCED MARRIAGE (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.) 19 OCCUPATION OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town)according to law, this (Name of city or flown) Certificate issued (City or Town Clerk or Registrar) (Year) (Month) (Dav) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 5. (If marriage was solemnized in a church, give its NAME instead of street and number) (Month) Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)St., City or town of ż 10 -1436 25 Certificate received by city or town clerk... (Month) (Day) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-riage is to be contracted before he proceeds to solemnize the same. PLACE OF MARRIAGE City or Town..... (Do not enter name of village or section (Month) (Day) · (Year) of city or town) Intention No. 3 FULL NAME 13 FULL NAME GROOM BRIDE (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR AGE AT LAST 14 AGE AT LAST BIRTHDAY.... BIRTHDAY BINDING (Years) (Years) 6 RESIDENCE 16 RESIDENCE WIDOWED NUMBER OF WIDOWED 17 NUMBER OF MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st, 2d, 3d, etc.) 13 (1st, 2d, 3d, etc.) 9 OCCUPATION 19 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF NAME OF FATHER C FATHER Up 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the..... (City or Town) according to law, this (Name of city or town) Certificate issued Octobra (Month) (City or Town Clerk or Registrar) (Day) (Year) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. ... (If marriage was solemnized in a church, give its NAME instead of street and number) (Month) (Year) (Day) Official station (Minister of the Gospel, Clergyman, Priest Babbi, or Justice of the Peace) Residence No.....St., City or town of 26 26 25 Certificate received by city or town clerk... (Month) (Year) (Day) CITY OR TOWN CLERK OR REGISTRAR

FORM R-1	SECRÉTARY SI CONTINUE
ery Item IFICATE side for	Division of VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. (City or town making return)
RD. Ev S CERTI reverse	City or Town. 2 Date of Marriage. Registered No. (Do not enter name of village or section of city or town) (Month) (Day) (Year) Intention No.
MARGIN RESERVED FOR BINDING B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every is of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICA ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side extracts from the laws relating to the RETURN OF MARRIAGES.	
Ä	25 Certificate received by city or town clerk hunt 13 -1436 Strong CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 The Commonwealth of Massachusetts Office of the SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE RECORD. Every it THIS CERTIFICA See reverse side This certificate must be delivered to the person before whom the mar-riage is to be contracted before he proceeds to solemnize the same. (City or town making return) PLACE OF MARRIAGE City or Town..... (Do not enter name of village or section (Month) (Dav) · (Year) of city or town) Intention No. 13 FULL NAME 3 FULL NAME BRIDE GROOM Mary Margaret Giblin (Also maiden name, if widowed or divorced) James W. Hurlev 5 COLOR 15 COLOR 4 AGE AT LAST BIRTHDAY 34 14 AGE AT LAST 31 Wh. Wh. (Years) (Years) 6 RESIDENCE 16 RESIDENCE 56 Emmett St.. Marlboro, Mass. Newton St., Southborough 7 NUMBER OF 8 WIDOWED 17 NUMBER OF 18 WIDOWED lst or DIVORCED single lst. MARRIAGE MARRIAGE OR DIVORCED single (1st. 2d. 3d. etc.) (1st, 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION Printer Bookkeeper 10 BIRTHPLACE 20 BIRTHPLACE Marlboro, Mass. Marlboro, Mass. (City or town) (State or country) (City or town) (State or country) 11 NAME OF FATHER 21 NAME OF Timothy Francis Hurley James P. Giblin FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER Emma A. Bouthillet OF MOTHER Mary Flannery town 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) Southborough seventh November according to law, this (Name of city or town)
Certificate issued NOVEMBER (City or Town Clerk or Registrar) (Month) (Day) (Year) 7 Washinstan 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No./.... (If marriage was solemnized in a church, give its NAME instead of street and number) ்.... Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) ...St. City or town of .. 25 Certificate received by city or town clerk.... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-	101	Office of the Secretary The Commonwealth of Massachusetts
CORD. Every item 11S CERTIFICATE 8 reverse side for	o. 6156 C	Division of VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. (City or town making return)
ERTE SE	5. No.	City or Town
ë, c. ë	12-3	(Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No
COS HIS	50m-12-35.	3 FULL NAME GROOM 13 FULL NAME BRIDE
E L		Louise Tansky
ry S.		Also maiden name, if widowed or divorced)
VG RMANE SURES		4 AGE AT LAST \(\frac{3}{3} \) \(\frac{5}{4} \) COLOR \(\frac{14}{6} \) AGE AT LAST \(\frac{2}{3} \) \(\frac{15}{6} \) COLOR \(\frac{14}{6} \) AGE AT LAST \(\frac{2}{3} \) \(\frac{15}{6} \) COLOR \(\frac{15}{6} \
AIC HAN		6 RESIDENCE
BINDIN S A PER ND ERAS		Cherry St. Denta berrugh 128 Malden St. Vercasher Mar
FOR BITHIS IS ONS ANI HUNDRR		7 NUMBER OF MARRIAGE OR DIVORCED 17 NUMBER OF MARRIAGE OR DIVORCED (1st, 2d, 3d, etc.) 18 WIDOWED OR DIVORCED
L LL		9 OCCUPATION Skilled Lyberry (Mason) 18 OCCUPATION Show Skins
RESERVEL BLACK INF ALTERA LATION, ONI		10 BIRTHPLACE Clinton Mass
A PACE		(City or town) (State or country) (City or town) (State or country)
RI 4G F OLA ETU		11 NAME OF Charles Dalarda 21 NAME OF Joseph Tansey
MARGIN UNFADIN fully suppli Y FOR VI		12 MAIDEN NAME Jours Busconi 2 MAIDEN NAME Modesta Sarry
A PEC S		23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the
E Her B		of Don'th Gerough according to law this sixt Esenth day of your or 1836
F 2 4 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		[(Name of city or town)
P. P	i	(Month) (Day) (Year) (City or Town Clerk or Registrar)
NL'S		24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 11 June 19 June 1
PE PE		(If marriage was solemnized in a church, give its/NAME instead of street and number)
VRITE PLA formation sh FORBIDDE cts from the		(Name of city or town) (Month) (Day) (Year)
ORI FIT		Name Parkard T. Valay Official station Visiat
WR info acts		(Minister of the Gospel, Clergyman Priest, Rabbi, or Justice of the Peace)
B.—W of inf ARE extrac		Residence No. 23 Palled St., City or town of Selection
ż		25 Certificate received by city or town clerk Drauby 9-1936 Ca Santas 15
		25 Certificate received by city or town clerk O'Conth) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 The Commonwealth of Massachusetts Office of SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the man 1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. Š. City or Town (Do not enter name of village or section (Month) (Year) (Day) of city or town) Intention No. ... 13 FULL NAME BRIDE 3 FULL NAME GROOM (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 4 AGE AT LAST 14 AGE AT LAST BIRTHDAY..... BIRTHDAY2...Q (Vears (Years) 6 RESIDENCE 16 RESIDENCE NUMBER OF 8 WIDOWED WIDOWED 17 NUMBER OF MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st. 2d. 3d. etc.) (1st, 2d, 3d, etc.) 9 OCCUPATION 19 OCCUPATION 10 BIRTHPLACE 28 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF NAME OF FATHER FATHER 22 MAIDEN NAME 12 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of (City or Town)according to law, this (Name of city or town) Certificate issued (City or Town Clerk or Registrar) (Month) (Day) (Year) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church, give its NAME instead of street and number) (Year) (Month) Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) Residence No......St., City or town of (Month) (Day) CITY OR TOWN CLERK OR REGISTRAR

Louis Pisceni Caroline Berri Residence of Groom. South boro, Mass Bride..... Mass " Age of Groom34 Bride 19 Color of GroomWhite..... Bride.....White Occupation of Groom. Laborer Bride Housemaid Birthplace of Groom.....Southboro, Mass Bride. Southboro, Mass No. of Marriage of Groom. First Bride First Groom Widowed or Divorced..... Rride ' Intention Filed. February 11, 1937 *By whom Married Earl F. Hauss Residence Nashua, N.H. Official Station... Clergyman Date of Marriage. February 17, 1937 Place Nashua, N.H. *Clergyman or Justice of the Peace. (Record continued over)

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GROOM'S FATHER AND MOTHER.

Father's Name Anthony Pisceni

" Residence Southboro, Mass...

" Age* 67 Color ... White...

" Occupation Laborer ...
" Birthplace Italy

Mother's Name. Marietta

"Residence. Southboro, Mass...

"Age*...50 Color. White...

"Occupation Homo...

" Birthplace. Italy

BRIDE'S FATHER AND MOTHER.

Father's Name. Baptiste Berri

" Residence Southboro, Mass

" Age* 55 Color White

" Occupation Laborer

" Birthplace. Italy

Mother's Name Mary Dalavalli
" Residence Southboro, Mass

" Age* 42 Color White
" Occupation Home

THE STATE OF NEW HAMPSHIRE

I hereby certify that the above marriage record is

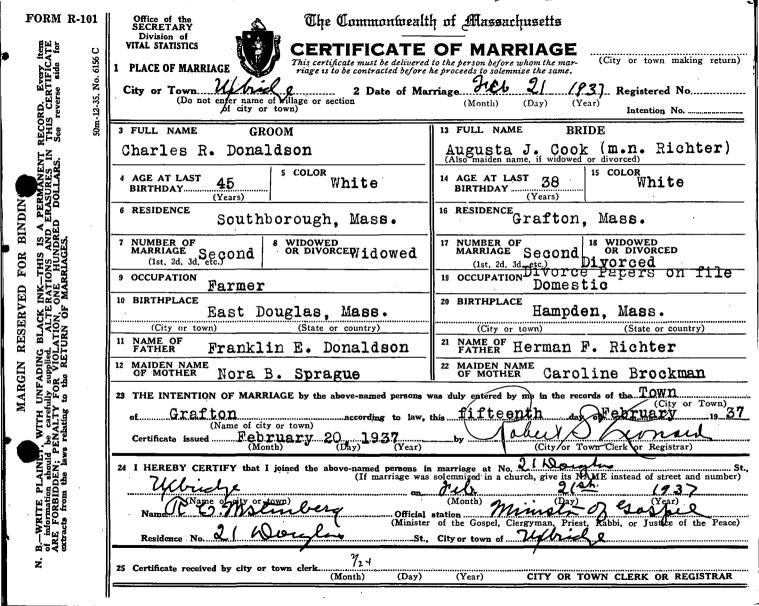
correct to the best of my knowledge and belief.

Clerk of Nashua, N.H.

Date March 10, 1937...

Birthplace.

^{*}If deceased, give age at death.



FORM R-101		of Massachusetts
item ATE for 56 C	This certificate must be delivered	OF MARRIAGE to the person before whom the mar- (City or town making return)
Every it	riage is to be contracted before	the proceeds to solemnize the same,
	(Do not enter name of village or section of city or town)	(Month) (Day) (Year)
CORD. HIS CEI se revers	3 FULL NAME GROOM	Intention No
NT RE IN TI S. Se	Jame P Starry	(Also maiden name, if widowed or divorced)
(G RMANE) SURES	4 AGE AT LAST SO S COLOR SIRTHDAY(Years) 5 COLOR	14 AGE AT LAST 46 BIRTHDAY (Years) 15 COLOR Wh
BINDING IS A PERM IND ERASU S.	8 RESIDENCE 24 Entaw 17. Last. Boston Mars	16 RESIDENCE Learner St. Smith Gerough
FOR B THIS IS ONS AN HUNDR	7 NUMBER OF 8 WIDOWED OR DIVORCED OR DIVORCED	17 NUMBER OF MARRIAGE CON OR DIVORCED CON (1st. 2d. 3d. etc.)
LE.S	9 OCCUPATION Marine Survey	19 OCCUPATION Jandress
RESERVED BLACK INK LALTERAL LATION, ONE	10 BIRTHPLACE	20 BIRTHPLACE
SER ACI	(City or town) (State or country)	(City or town) (State or country)
RES	11 NAME OF GLORGE William Starry	21 NAME OF FATHER Glbst & Krynedy
GIN ADIN Cupplid	12 MAIDEN NAME OF MOTHER Sand & Richette Jin de	22 MAIDEN NAME Bong B Friend T
ARGIN INFADI Ily suppl FOR VI	23 THE INTENTION OF MARRIAGE by the above-named persons w	ras duly entered by the in the records of the
M H. J.	of South berough according to law,	this transfer - Life day of June 1937
WIT VAL Cati	(Name of city or fown)	
Y. PER	Certificate issued (Month) (Day) (Year)	(City or Town Clerk or Registrar)
JNL hould N: by	24 I HEREBY CERTIFY that I joined the above-named persons in	marriage at No. 2 Learned St.,
PLA DDD	Touthborough (It marriage was	solemnized in a church, give its NAME instead of street and number)
TE Ratio from	Name of city or toy of	(Month) (Day) (Year)
VRI for FO cts	Name	of the Gospel, Clergyman Britist Rabbi, or Justice of the Peace)
NRE in VRE	Residence No. 8 Colons St.,	City or town of Clark Cond Mass !"
Z	25 Certificate received by city or town clerk. Many 3	1937 Thomason
	(Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town..... (Do not enter name of village or section (Month) (Day) ' (Year) of city or town) Intention No. ... 3 FULL NAME 13 FULL NAME BRIDE GROOM Charles & Harris (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 4 AGE AT LAST 2 14 AGE AT LAST BIRTHDAY BIRTHDAY..... (Years) (Years) 6 RESIDENCE 16 RESIDENCE Son the bernet 18 WIDOWED 7 NUMBER OF 8 WIDOWED 17 NUMBER OF MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st. 2d. 3d. etc.) (1st, 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (State or country) (City or town) 11 NAME OF 21 NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town)according to law, this (Name of city or town) Certificate issued March (Month) (Day) 24 I HEREBY CERTIFY that I somed the above-named persons in marriage at No. ... (If marriage was solephnized in a church, give its NAME instead of street and number) (Minister of the Gospel, Clergyman, Priest, Rabbi, or Figure of the Peace) CLI St., City or town of Fram 701 25 Certificate received by city or town clerk..... CITY OR TOWN CLERK OF REGISTRAR (Day)

(Month)

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division 404 RECORD. Every item THIS CERTIFICATE See reverse side for VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-riage is to be contracted before he proceeds to solemnize the same. 50m-12-35. (Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No. . 13 FULL NAME BRIDE FULL NAME GROOM (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 14 AGE AT LAST BIRTHDAY..... (Years) (Years) 6 RESIDENCE 16 RESIDENCE WIDOWED NUMBER OF 8 WIDOWED 17 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED MARRIAGE (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF 21 NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) (Name of city or town) Certificate issued (City or Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church, give its NAME instead of street and number) (Name of city or town) (Year) Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)St., City or town of 25 Certificate received by city or town clerk..... (Day) (Year) OR TOWN CLERK OR REGISTRAR

R-103	The Commonwell	th of Massachusetts
for the lich the lerk of lowing.	OFFICE OF THE SECRETARY DIVISION OF VITAL STATISTICS For the use of Clergyman or 1	CATE OF MARRIAGE magistrate solemnizing marriage (City or town)
rm is in wh or cl xxt foi	I PLACE OF MARKIAGE	tions on margin) Registered No
his fo town istrar ith ne FOR		Return of city or town of
y or regiment	3 FULL NAME GROOM	13 FULL NAME BRIDE
RECORI the cit to the of the PENAI	Samuel L. Sauchioni	(Maiden name, if widowed of divorced)
IG NENT Dents of furned ath day DDEN.	4 AGE AT LAST Z.Z. 5 COLOR W. Years	14 AGE AT LAST 2 3 15 COLOR BIRTHDAY Years
INDIN PERMA not resid and re the ter FORBI	6 RESIDENCE AT TIME OF MARRIAGE South borough	16 RESIDENCE AT TIME OF Stopkentry Mass
OR BI	7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 8 SINGLE, WIDOWED, OR DIVORCED	17 NUMBER OF MARRIAGE WIDOWED, OR DIVORCED
D FITTING AT A STAND A STAND AT A STAND AT A STAND A	9 OCCUPATION admilising	19 OCCUPATION Jackon Worker
Tiene K	10 BIRTHPLACE South berough	20 BIRTHPLACE Newton Maso
CER THE PART OF TH	(City or town) (State or country)	(City or town) (State or country)
RES LAC ties d out took took HIS	11 NAME OF Joseph Sancheoni	21 NAME OF June Caferelli
GIN ING B The par be fille rriage IN TI	12 MAIDEN NAME Lucy Carboni	22 MAIDEN NAME Lucy Cauling
FAD FAD to to RES		ns was duly entered by me in the records of the city (or town) of
M UN	Certificate issued Name 15. 1987	his Eighth day of May 1937
iatin d, ar d, ar vhick ER	24 To the Clerk of Spriftbury	ing h
office office in very DOI	(City or town) I HEREBY CERTIFY that the foregoing is a true of	copy of the Certificate of Marriage issued (Month) (Day) (Year)
INL Seon olem own NS /	by	the city (or town) of
PLA is sering to TIO	1	t No. It I Two war celest Church St.,
f the lage lity HU	Ward in the city (or town) of	was solemnized in a church, give its NAME instead of street and number)
WRI narri he c NLT)		Official station
15	Residence No. 33 Main St.	, City or town of Atofokendon Thes
3.27	25 Received by city Jun 2 1937	Thisacharis REGISTRAR

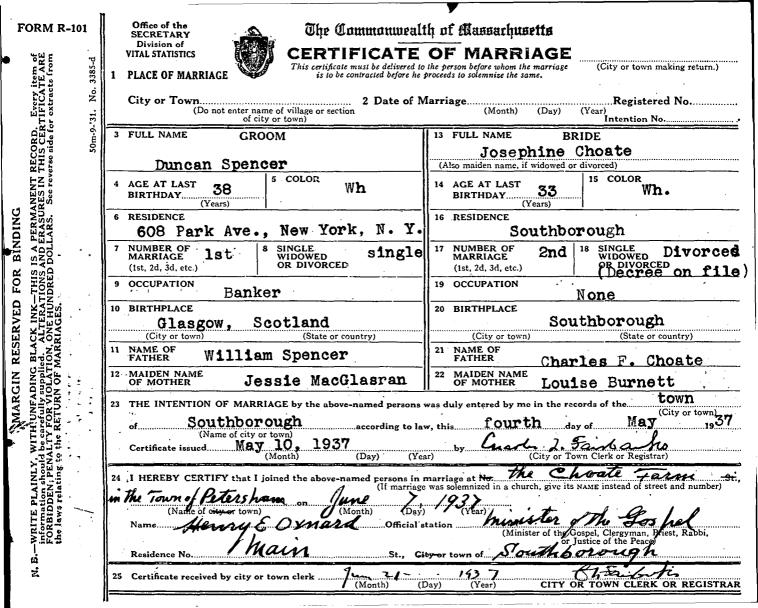
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The state of the country) 3 FULL NAME GROOM While Datherini 4 AGE AT LAST 57 S COLOR BIRTHDAY (Years) 4 AGE AT LAST 57 S COLOR BIRTHDAY (Years) 5 RESIDENCE 4 RESIDENCE 7 NUMBER OF A 6 WIDOWED MARRIAGE 17 NUMBER OF MARRIAGE 2 1 S WIDOWED MARRIAGE 2 1 S OCCUPATION MARRIAGE 2 1 S WIDOWED MARRIAGE 2 1 S OCCUPATION MARRIAGE 2 1 S OCCUPA	•	RECORD. Every item O THIS CERTIFICATE & See reverse side for M	20m-12-35. No. 6156 C	Division of VITAL STATISTICS CERTIFICATE This certificate must be delivered riage is to be contracted before	OF MARRIAGE to the person before whom the mar- the proceeds to solemnize the same. (Month) (Day) (Year) Intention No.
		MARGIN RESERVED FOR BINDING B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT of information should be carefuly supplied. ALTERATIONS AND ERASURES IN ARE FORBIDDEN; PENALTY FOV VIOLATION, ONE HUNDRED DOLLARS. extracts from the laws relating to the RETURN OF MARRIAGES.	50m-1	4 AGE AT LAST 5 S COLOR BIRTHDAY (Years) 6 RESIDENCE 7 NUMBER OF 2 8 WIDOWED OR DIVORCED (1st, 2d, 3d, etc.) 9 OCCUPATION Sulction 10 BIRTHPLACE (City or town) (State or country) 11 NAME OF FATHER Louis Colorini 12 MAIDEN NAME OF MOTHER Drucks Persons Of MOTHER Drucks Persons (Name of city or lown) Certificate issued (Month) Certificate issued (Month) Name of city or town (Day) (Year) Name of city or town) Name of city or town (Month) Name of city or town) Name of city or town (Month) Name of city or town) Name of city or town (Minister Residence No. Malla (Minister St., Malla (Minister Residence No. Malla (Minister Minister Residence No. Malla (Minister Minister Minist	13 FULL NAME angue BRIDE (Also marden name, if widowed or divorced) 14 AGE AT LAST 15 COLOR BIRTHDAY (Years) 16 RESIDENCE Thus Man Man 17 NUMBER OF MARRIAGE 2 18 WIDOWED OR DIVORCED OR DIVORCED (Ist, 2d, 3d, etc.) 19 OCCUPATION 20 BIRTHPLACE (City or town) 21 NAME OF FATHER 22 MAIDEN NAME OF MOTHER 23 MAIDEN NAME OF MOTHER (City or Town Clerk or Registrar) 18 WIDOWED OR DIVORCED WISON (City or Town) (City or Town Clerk or Registrar) 19 OCCUPATION (City or Town Clerk or Registrar) (City or Town Clerk or Registrar) (Month) (Day) (Month) (Day) (City or Justice of the Peace) (City or town of Management Rabbi, or Justice of the Peace) (City or town of Management Rabbi, or Justice of the Peace) (City or town of Management Rabbi, or Justice of the Peace)

FORM R-101 The Commonwealth of Massachusetts. Office of the SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-riage is to be contracted before he proceeds to solemnize the same. 1 PLACE OF MARRIAGE City or Town.... 2 Date of Marriage...... Registered No...... (Do not enter name of village or section (Day) · _ (Year) (Month) of city or town) Intention No. 13 FULL NAME 3 FULL NAME GROOM BRIDE (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 4 AGE AT LAST 14 AGE AT LAST BIRTHDAY......2 BIRTHDAY (Years) (Years) 6 RESIDENCE 16 RESIDENCE NUMBER OF WIDOWED 17 NUMBER OF 18 WIDOWED MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.) OCCUPATION 19 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF 21 NAME OF FATHER -FATHER CO 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER (City or Town) ... according to law, this (Name of city or town Certificate issued (Month) (Day) (Year) Registrar) instead of street and number) (MonthSt., City or town of ... 1937 25 Certificate received by city or town clerk. (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the mar-(City or town making return) 1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town..... 2 Date of Marriage..... Registered No..... (Do not enter name of village or section (Month) (Dav) · (Year) of city or town) Intention No. . 13 FULL NAME BRIDE 3 FULL NAME GROOM Frances Balda if widowed or divorced) 15 COLOR 14 AGE AT LAST BIRTHDAY2 BIRTHDAY.... BINDING (Years (Years) 16 RESIDENCE 6 RESIDENCE 7 NUMBER OF WIDOWED 17 NUMBER OF WIDOWED MARRIAGE OR DIVORCED OR DIVORCED MARRIAGE (1st, 2d, 3d, etc.) (1st. 2d. 3d. etc.) 9 OCCUPATION 18 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City dr town) (State or country) (State or country) (City or town) 11 NAME OF 21 NAME OF FATHER FATHER-12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town)according to law, this (Name of city or town) Certificate issued (Month) (Day) Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church, give its NAME instead of street and number) (Month) (Day) Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)St.. City or town of Residence No. 25 Certificate received by city or town clerk... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

R-103	The Annuaument	h of Massachusetts
rm is for the in which the or clerk of xt following.	OFFICE OF THE SECRETARY DIVISION OF VITAL STATISTICS 1 PLACE OF MARRIAGE CERTIFIC For the use of Clergyman or n (See instruct)	CATE OF MARRIAGE nagistrate solemnizing marriage (City or town) ions on margin) Registered No
This for town gistrar nth ne FOR		.Return of city or town of
RECORD. the city of to the ref of the mo	3 FULL NAME GROOM On thony N. Pierro	13 FULL NAME BRIDE Sena Wary Dragomani (Maiden name, if widowed or divorced)
IG NENT I dents of furned nth day DDEN.	4 AGE AT LAST 24 5 COLOR Years	14 AGE AT LAST 21 15 COLOR Years
NDIN ERMA Of resident and re the tol	6 RESIDENCE & Floral an Natick marriage	16 RESIDENCE AT TIME OF South brough Mass
OR BI	7 NUMBER OF TO 1- 8 SINGLE, WIDOWED, OR DIVORCED OR DIVORCED	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 18 SINGLE, WIDOWED, OR DIVORCED
D F(9 OCCUPATION Factory Worker	19 OCCUPATION Jactory worker
V E	10 BIRTHPLACE Byfill Mass	20 BIRTHPLACE South borough mass
SEH SK H to th	(City or town) (State or country)	(City or town) (State or country)
RESTRIES ON THIS	11 NAME OF Victorias Pierro	21 NAME OF Ardazio Gragomani
CIN NG B F file Triage	12 MAIDEN NAME Carmella Termara	OF MOTHER Maria DE Prete
MAR(UNFADI G when the distobation is to bath the mar ASURES RS.	23 THE INTENTION OF MARRIAGE by the above-named person South Groung L. according to law, the continuous conti	ns was duly entered by me in the records of the eity (or town) of this Thirtsenth day of May 1937. by Curl L. Faulous Registrar
VITH	24 To the	•
ANIT DOO	I HEREBY CERTIFY that the foregoing is a true c	opy of the Certificate of Marriage issued(Month) (Day) (Year)
INI.	(Name of clerk)	the city (or town) of
PLA he pe or 1 or 1 JNDJ	that the persons named therein were joined in marriage by me, at	was solutional in a church, give its NAME instead of street and number)
of the riage city CERY		Official station
WR use mar the AL1 ONE	1	Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
. B.—		City or town of transcent the M
3. 2.	25 Received by city 19 or town clerk	REGISTRAR



Every item First form For side for Man No. 6156 C	Office of the SECRETARY Division of VITAL STATISTICS 1 PLACE OF MARRIAGE The Commonwealth of Massachusetts CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. (City or town making return)
	City or Town. 2 Date of Marringe. Registered No. (Do not enter name of village or section of city or town) (Month) (Day) (Year) Intention No
MARGIN RESERVED FOR BINDING B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CEI ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED BOLLARS. See reversectable from the laws relating to the RETURN OF MARRIAGES. SOM-12-35.	3 FULL NAME GROOM 3 FULL NAME GROOM 4 AGE AT LAST 3
ż	25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 The Commonwealth of Massachusetts Office of the SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the mar-(City or town making return) 1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town 2 Date of Marriage..... Registered No..... (Do not enter name of village or section (Year) (Month) of city or town's Intention No. 13 FULL NAME 3 FULL NAME GROOM BRIDE (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR AGE AT LAST 14 AGE AT LAST BIRTHDAY 3 ∑ىۋىب BIRTHDAY (Years) (Years) 6 RESIDENCE 16 RESIDENCE 7 NUMBER OF WIDOWED 17 NUMBER OF WIDOWED MARRIAGE OR DIVORCED OR DIVORCED MARRIAGE (1st, 2d, 3d, etc.) (1st. 2d. 3d. etc.) 9 OCCUPATION 19 OCCUPATION BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 21 NAME OF 11 NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town)according to law, this (Name of city or town) Certificate issued (Month) (Year) (City or Town Clerk or Registrar) (Day) (If marriage was solemnized in a church, give its NAME instead of street and number) Name of city of (Month) Official station St., City or town of Seasal St. Tryme ż (Day) CITY OR TOWN CLERK OR REGISTRAR

Age of Groom Color of Groom Bride No. of Marriage of Groom . Groom Widowed or Divorced Bride Intention Filed *By whom Ma Residence Official Station Date of Marria Place ... *Clergyman or Justice of the Peace. (Record continued over)

(Record continued)

GROOM'S FATHER AND MOTHER.

GROOMS FAIRER AND MOTHER.
Father's Nama azaro Ramelli
" Residence U
" Age* 9 Color W
" Occupation Landney
" Birthesacerica Hali
Mother's Namelindita Barrella
" Residence
" Age* 6 5 Color W
" Occupation House wife
" Brotherma Staly
BRIDE'S FATHER AND MOTHER
Father's Name Rouge Kakusaan
" Residento Boston das
" Age* 5 4 Color W
" Occupation O Sanley
" Birthplace Tiece
Mother's Nahlay Cockinos
" Residence
" Ago # 47 Colon (a)

" Birthplace Wille

THE STATE OF NEW HAMPSHIRE

I hereby certify that the above marriage record is correct to the best of my knowledge and belief the correct to the best of my knowledge and belief the correct to the best of my knowledge.

Clerk of ALEM N. H. Date AUG.3 937

[&]quot;If deceased, give age at death.

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE 6156 (City or town making return) This certificate must be delivered to the person before whom the mar-PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town.... (Do not enter name of village or section (Month) (Day) · (Year) of city or town) Intention No. ... 13 FULL NAME BRIDE 3 FULL NAME GROOM (Also maiden name, if widowed or divorced) 15 COLOR 14 AGE AT LAST 2. 2. BIRTHDAY BIRTHDAY BINDING (Years) (Years) 6 RESIDENCE 16 RESIDENCE WIDOWED OR DIVORCED WIDOWED 17 NUMBER OF MARRIAGE MARRIAGE OR DIVORCED (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc. 9 OCCUPATION Factors 19 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (State or country) (City or town) 11 NAME OF 21 NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of (City or Town) enth berough according to law, this (Name of city or town) Certificate issued (City or Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at the (If marriage was solemnized in (Month) Official station . (Minister of the Gospel, Cleggyman, Priest, Rabbi, or Justice of the Peace) Of St., City or town of JAMA 25 Certificate received by city or town clerk.... (Month) (Day) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101	Office of the SECRETARY Division of VITAL STATISTICS Office of the Commonwealth of Massachusetts CERTIFICATE OF MARRIAGE
ECORD. Every its THIS CERTIFICAL See reverse side f 50m-12-35, No. 6156 C	1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. (City or town making return)
	City or Town 2 Date of Marriage Registered No
See Som	3 FULL NAME GROOM 13 FULL NAME BRIDE
IARES IN TARS.	George A Here Jerson (Also maiden name, if widowed or divorced) (Sorrell)
	4 AGE AT LAST 50 BIRTHDAY (Years) 5 COLOR BIRTHDAY (Years) 14 AGE AT LAST 3 4 IS COLOR Wh.
BINDING S A PERM ND ERASU S. DOI	6 RESIDENCE 16 RESIDENCE 16 RESIDENCE Muss
BIN S A SREE S.	7 NUMBER OF 12 WIDOWED
FOR THIS ONS A HUNE	MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st. 2d, 3d, etc.) OR DIVORCED (1st. 2d, 3d, etc.)
18.49	9 OCCUPATION Synthy 18 OCCUPATION Gt I (and
VEI INK ERA F ML	10 BIRTHPLACE 20 BIRTHPLACE 7 . +
ACK NON-	(City or town) (State or country) (City or town) (State or country)
RESERVED G BLACK INK LATION, ONE	11 NAME OF Broge & Hendison 21 NAME OF Training & Samuel
MARGIN UNFADING fully supplied Y FOR VIO 7 to the RE	12 MAIDEN NAME OF MOTHER addy B nutt 22 MAIDEN NAME Nova Needlan
CAR CINE FOR TO the	23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the
M TH LTY ting	of San Tabanas according to law, this threaty-number day of July 19.3)
WI be ENA rela	Certificate issued by 27 - 1437 by Cush & Factority
NLY, mild f; Pl	(Month) (Day) (Yéar) (City or Town Clerk or Registrar)
LAII DEN	24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No
-WRITE PI information IE FORBIDI tracts from 1	(Name of city or tame) (Year) (Year)
VRIT FOI cts i	Name
B.—V of in ARE extra	Residence No. 730 Law City or town of Date
z.	25 Certificate received by city or town clerk. (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR
	LASC (Tell)

FORM R-101		h of Massachusetts
for for		OF MARRIAGE to the person before whom the mar- (City or town making return)
FICA side	1 PLACE OF MARRIAGE This certificate must be delivered riage is to be contracted before h	to the person before whom the mar- he proceeds to solemnize the same. (City or town making return)
ERTIFERTIFE 6	City or Town 2 Date of Mar	rriage
S CEI rever	of city or town)	(Month) (Day) (Year) Intention No
XECO THIS See	3 FULL NAME GROOM	13 FULL NAME BRIDE
FI.	Edward Patrick Traces	(Also maiden name, it wide ed or divorced)
NG RMANEI SURES SOLLAR	4 AGE AT LAST 31 5 COLOR BIRTHDAY (Years)	14 AGE AT LAST 28 15 COLOR BIRTHDAY (Years)
BINDIN IS A PER ND ERAS ORED DO	6 RESIDENCE	16 RESIDENCE
BIN IS A ND NEI S.	7 NUMBER OF 1 8 WIDOWED	17 NUMBER OF . 18 WIDOWED
FOR THIS I ONS A HUNDERINGE	MARRIAGE OR DIVORCED — (1st. 2d, 3d, etc.)	MARRIAGE find OR DIVORCED (1st, 2d, 3d, etc.)
JE.S	9 OCCUPATION CARALAGEN	19 OCCUPATION at home
RESERVED BLACK INK L ALTERAT LATION, ONI TURN OF MA	10 BIRTHPLACE	20 BIRTHPLACE
NER NO.	(City or town) (State or country)	(City or town) (State or country)
RES	11 NAME OF Patrick Tracey	21 NAME OF James Ma Guliffe
GIN ADIN Supplie Se RI	12 MAIDEN NAME OF MOTHER Many Gurray	22 MAIDEN DAME Ellen Bleach
ARGIN UNFADI UNF SUPPI FOR VI TO THE R	23 THE INTENTION OF MARRIAGE by the above-named persons w	vas duly entered by me in the records of the
M TH T arefu	of South bough according to law, t	this day of Jacks 193
WT. NAI relat	(Name of city or town) Certificate issued	by Cick J. Fairly Cults (City or Town Clerk or Registrar)
ILY, aid by; PE aws	(Month) (Day) (Year)	and all and be all
PLAIN n shou DDEN;	24 I HEREBY CERTIFY that I joined the above-named persons in (If marriage was	marriage at No. 24 Medical St., solemnized in a church, give its NAME instead of street and number)
TE natio	(Name of kity or town)	(Month) (Day) (Year)
WRI infort i FO acts	On lied (Minister	station Of the Gospel, Clergyman Priest, Rabbi, or Justice of the Peace)
B. – ARE extra	Residence No. 4 March St.,	City or town of
z	25 Certificate received by city or town clerk (Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR
	(Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town.... 2 Date of Marriage...... Registered No...... (Do not enter name of village or section (Month) (Day) · (Year) of city or town) Intention No. 13 FULL NAME 3 FULL NAME GROOM BRIDE (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR AGE AT LAST 14 AGE AT LAST -BIRTHDAY.... BIRTHDAY (Years) (Years) 6 RESIDENCE 16 RESIDENCE 7 NUMBER OF WIDOWED 17 NUMBER OF WIDOWED OR DIVORCED MARRIAGE OR DIVORCED MARRIAGE (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc. 9 OCCUPATION 19 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (State or country) (City or town) (State or country) (City or town) 11 NAME OF 21 NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town)according to law, this (Name of city or fown) Certificate issued (Month) (City or Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Care (If marriage was solemnized in a church, give its NAME instead of street and number) Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, on Justice of the Peace) A.....St., City or town of ... (Month) (Day) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101	Office of the SECRETARY The Commonwealth of Massachusetts
Every item tTIFICATE e side for No. 6156 C	Division of VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. (City or town making return)
	City or Town 2 Date of Marriage Registered No. (Month) (Day) (Year) Intention No
MARGIN RESERVED FOR BINDING TE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Bation should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CEI RBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See rever from the laws relating to the RETURN OF MARRIAGES. SOM-12-35.	(City or town) (Day) (Year) Intention No. Intention Intention No. Intention Intention No. Intention Intention No. Intention No. Intention No. Intention Intent
N. B.—WR of infor ARE F(extracts	Name Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) Residence No. Boston P. A. St., City or town of Schulle (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR
	Court of the court

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Groom Dominie Volgala
Bride Pine marcotte
Residence of Groom duulle Mac
Residence of Bridanarlhow Mass
Age of Groom 23
Age of Bride
Color of Groom
Color of Bride
Occupation of Groom) ye worker
Occupation of Bride The Morkey
Birthplace of Groom spkinton Mase
Birthplace of Bride walley mass
No. of Marriage of Groom
No. of Marriage of Bride
Groom Widowed or Divorced
Bride Widowed or Divorced
Intention Filed Sept 6 - 1837
*By whom Married any Mountel
Residence Salem N. A.
Official Station VIII I The Viale
Date of Marriage
Place Vallem D' H'. *Clergyman or Justice of the Peace.
(Record continued over)
/2000000 00000000 00000

GROOM'S FATHER AND MOTHER.
Father's Name Unanzio Tolgat
Father's Resident Claulle mass
Father's Age* 4 6 Color
Father's Occupation Carpenter
Father's Birthplace taly
Mother's North any morrangeme
Mother's Residence Marille Muss
Mother's Age* 4 Color Color
Mother's Occupation The keeper
Mother's Birthplace Italy
BRIDE'S FATHER AND MOTHER.
Father's Name Marcotte
Father's Residence Whany n. Y.
Father's Age* Color
Father's Occupation James
Father's Birthflace Mompson Con
Mother's Name Cua Chicotte
Mother's Residence Carlliono mass
Mother's Age* Color
Mother's Occupation Clamelles
Mother's Birthplace New den Comm
THE STATE OF NEW HAMPSHIRE
I hereby certify that the above marriage record is
correct to the best of my knowledge and belief.
Amss J. Coman
Clerk of SALEM N H
Date

^{*}If deceased, give age at death.

FORM	R-101	Office of the SECRETARY The Commonwealth of Massachusetts
frem for for SC		VITAL STATISTICS CERTIFICATE OF MARRIAGE
ORD. Every in IS CERTIFICA reverse side	1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. (City or town making return)	
퀀F 8		City or Town
RD.	0m-12-35.	(Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No
₹ECO THE See	SOB	3 FULL NAME GROOM 13 FULL NAME BRIDE
MANENT RESURES IN OLLARS.	Harbert P Faber Dollie Virginia Sword (Also maiden name, if widowed or divorced)	
	4 AGE AT LAST 37 BIRTHDAY (Years) 5 COLOR White- 14 AGE AT LAST 31 BIRTHDAY (Years) 15 COLOR White-	
BINDIN S A PER ND ERA		6 RESIDENCE Cordanille Road. South borough 129 Milk St., Fitch burg Mass
OR BI	AGES.	7 NUMBER OF MARRIAGE FIRST 18 WIDOWED OR DIVORCED (1st, 2d, 3d, etc.) 18 WIDOWED OR DIVORCED (1st, 2d, 3d, etc.)
K-TF TION	ĀRRĪ	9 OCCUPATION Office Manager 18 OCCUPATION Office Clark
A SA S	2	10 BIRTHPLACE 20 BIRTHPLACE
ER ST.	:0 -2	Soston Maso (City or town) (State or country) (City or town) (State or country)
BLACK BLACK ATION URN O	11 NAME OF 21 NAME OF	
ING R	RET	Caye nason of the
ARGIN JNFADI Ly suppl FOR VI	4	12 MAIDEN NAME Fannie May Baker 22 MAIDEN NAME Char Cotte augusta Stohl torg
IAR UNF FO	3	23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town)
IT M	ting	1 Scoth box ough Then to think a Sentember 1227
WI.	relat	Certificate issued Suplumber 28 1937 by Con I Sailands
Park Eb	8.8	(Month) (Day) (Year) (City or Town Clerk or Registrar)
PLAINL on should (DDEN; o the lay	24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Cilgium Congregational Classical St. J. Leaburg. Massachusells on October 2. 1937	
TE natie RBI	P P	(Month) (Day) (Year)
WRI for FO	st st	Name. Official station
RE L	i i	Residence No. 525 Main St., City or town of Fitchburg, Mass.
z'	· -	25 Certificate received by city or town clerk

FORM R-101	Office of the SECRETARY & The Commonwealt	h of Massachusetts
item ATE for 56 C		OF MARRIAGE (City or town making return)
Every in TIFICA e side		he proceeds to solemnize the same.
RECORD. Every THIS CERTIFI See reverse sid Som-12-35, No. 61	(Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No
NT RECO IN THIS 5. See 50m.	Raymond Reyler allan	(Also maiden name, if widowed by divorced)
JING PERMANE: RASURES DOLLAR	4 AGE AT LAST 29 COLOR White	14 AGE AT LAST 21 15 COLOR BIRTHDAY (Years)
BINDING IS A PERM IND ERASU S.	6 RESIDENCE mass	Louthbro mas
FOR B) THIS IS ONS ANI HUNDR	7 NUMBER OF MARRIAGE OR DIVORCED (1st. 2d. 3d. etc.)	17 NUMBER OF 18 WIDOWED OR DIVORCED (1st, 2d, 3d, etc.)
154	9 OCCUPATION Veteranana	19 OCCUPATION at home
RESERVED BLACK INK LATION, ONE TURN OF MA	10 BIRTHPLACE	20 BIRTHRLACE man
	11 NAME OF FATHER Label Label	(City or lown) (State or country) 21 NAME OF FATHER
GIN ADING supplied	12 MAIDEN NAME Male n Munson	22 MAIDEN NAME Jama Beny
MARGIN B.—WRITE PLAINLY, WITH UNFADII of information should be carefully suppl ARE FORBIDDEN; PENALITY FOR VI extracts from the laws relating to the R	23 THE INTENTION OF MARRIAGE by the above-named persons v	was duly entered by me in the records of the
	(Name of art or town) Certificate issued (Month) (Day) (Year)	by (Lity or Town Clerk or Registrar)
	24 I HEREBY CERTIFY that I joined the above-named persons in (If marriage was	marriage at No. St solemnized in a church, give its NAME instead of street and number)
	Minister	station (Day) & 403 (Year) of the Gospel, Clergyman Priest, Rabbi, or Justice of the Peace)
	Residence No. 194 Puntutury 55t.	City or town of Wir Ton Culle
Z	25 Certificate received by city or town clerk(Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR

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orm is for the in which the voice out following.	OFFICE OF THE SECRETARY DIVISION OF VITAL STATISTICS COPY OF CERTIFI For the use of Clergyman or (See instruct)	th of Massachusetts CATE OF MARRIAGE magistrate solemnizing marriage (City or town) sons on margin) Registered No.
town for the factor of the fac	2 DATE OF MARRIAGE	. Return of city or town of
reg II	(Month) (Day) (Year) GROOM	BRIDE
ECORD. the city to the of the PENALI	3 FULL MAME Group E. Douaghy	13 FULL Jean W. Horm (If a widow or divorced, give also maiden name)
MG ENT RI sturned ath day	4 AGE AT LAST 30 STOLOR (Years) 5 COLOR (Years)	14 AGE AT LAST 25 15 COLOR Wile (Years)
ERMAN t resid and re the te FORBI	6 RESIDENCE AT TIME OF 5 Plus Laure, Dor.	16 RESIDENCE AT TIME OF 101 W. Venne St., Boston MARRIAGE
S A Pl are no tested before	7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.)	17 NUMBER OF MARRIAGE WIDOWED, OR-DIVORCED
MARGIN RESERVED FC NFADING BLACK INK—THIS II then the parties to the marriage is to be filled out, properly att the marriage took place, on or SURES IN THIS CERTIFICATE	9 OCCUPATION Physician	19 OCCUPATION Special worker
	10 BIRTHPLAGE (City or town) (State or country)	20 BIRTHPLACE (City or town) (State or country)
	11 NAME OF William Donaghy	21 NAME OF Rober How
	12 MAIDEN NAME Mary J. Mc Jutosh	22 MAIDEN NAME Wrinfred Wallace
	according to law,	
H U ing ving vich	Certificate issued 198	7 by Pelicip 1. Covincy REGISTRAR HOL
JNLY, WIT rason official solemnized town in wil NS AND RED DOLL	(City or town) I HEREBY CERTIFY that the foregoing is a true by (Name of clerk)	f the city (or town) of
TE PLA of the pe inge is ing or eity or ERATIC HUNDI	that the persons named therein were joined in marriage by me, and the city (or town) of Sarahaman and	age was solemnized in a church, give its NAME instead of street and number)
use of marrians the ALT ONE	Residence No. St. Marles Rectors St	Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) L. City or town of
N. 88	25 Received by city GNday 18 1937	Shawbartis REGISTRAR

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Groom Robert J. Vautier		
Bride Virginia Cerutti		
Residence of Groom Haverhill, Mass		
Residence of Bride Fayville, Mass.		
Age of Groom 33		
Age of Bride 25		
Color of Groom White		
Color of Bride White		
Occupation of Groom Shoe Stitcher		
Occupation of Bride Book keeper		
Birthplace of Groom Concord. N.H.		
Birthplace of Bride Framingham Mass.		
No. of Marriage of Groom 2nd.		
No. of Marriage of Bridelst.		
Groom Widowed or Divorced Divorced		
Bride Widowed or Divorced		
Intention Filed September 22,1937		
*By whom Married Rev. G. Ernest Thomas		
Residence Concord N.H.		
Official Station Clergyman		
Date of Marriage October 23,1937		
Place Concord, N.H.		
*Clergyman or Justice of the Peace.		
(Record continued over)		

GROOM'S FATHER AND MOTHER

GROOM'S FATHER AND MOTHER.
Father's Name Annis Vautier
Father's Residence Oakland, Cal.
Father's Age*40 ColorWhite
Father's Occupation Carpenter
Father's Birthplace
Mother's Name Ellen Dwyer
Mother's Residence Haverhill, Mass.
Mother's Age* 66 Color White
Mother's Occupation Housewife
Mother's Birthplace Waterbury, Vt
BRIDE'S FATHER AND MOTHER.
Father's Name Joseph Cerutti
Father's Residence Fayville, Mass.
Father's Age* 58 Color White
Father's Occupation Laborer
Father's Birthplac Province Varese, Italy
Mother's Name Linda Colombo
Mother's Residence Grafton, Mass
Mother's Age* 45 Color .White
Mother's Occupation
Mother's Birthplater Ovince Varese, Ital
THE STATE OF NEW HAMPSHIRE
.I hereby contify that the above matriage record is
correct in the best of my knowledge and belief.
Mully () They
Clerk of Concord New Marpahire
DateNovember 1,1937
_

"If deceased, give age at death.
Reis nr. 30-137
C2 Tarket

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the mar-(City or town making return) 1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town.... (Do not enter name of village or section (Month) (Day) · (Year) of city or town) Intention No. 13 FULL NAME 3 FULL NAME BRIDE GROOM Marie Dirmon (Also maiden name, if widowed or divorced) 4 AGE AT LAST 2 15 COLOR 14 AGE AT LAST 22 BIRTHDAY (Years) (Years) 6 RESIDENCE 16 RESIDENCE Douth barres muss 7 NUMBER OF WIDOWED OR DIVORCED 18 WIDOWED 17 NUMBER OF MARRIAGE OR DIVORCED MARRIAGE (1st, 2d, 3d, etc.) (1st, 2d, 3d, 9 OCCUPATION 18 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF 21 NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) (Name of city or town) Certificate issued (City or Town Clerk or Registrar) (Year) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Line Rd Nobsect St. (If marriage was solemnized in a church, give its NAME instead of street and number) (Name of city or town) Official station Munica The Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) St., City or town of Malboro 25 Certificate received by city or town clerk. (Month) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE Ö (City or town making return) This certificate must be delivered to the person before whom the mar-PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town 2 Date of Marriage Registered No. (Do not enter name of village or section (Month) (Day) · (Year) of city or town) Intention No. 13 FULL NAME BRIDE 3 FULL NAME GROOM S COLOR 15 COLOR 14 AGE AT LAST AGE AT LAST BIRTHDAY BIRTHDAY..... (Years) (Years) 6 RESIDENCE 16 RESIDENCE South berough 7 NUMBER OF 17 NUMBER OF 18 WIDOWED MARRIAGE OR DIVORCED OR DIVORCED MARRIAGE (1st, 2d, 3d, etc.) (1st. 2d. 3d. etc.) OCCUPATION A 19 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF FATHER 21 NAME OF FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of (City or Town) (Name of city or town) Certificate issued (City or Town Clerk or Registrar) (Dav) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 50 Wash ington St. St. (If marriage was solemnized in a church, give its NAME instead of street and number) Natick November 26 1937 (Month) (Day) Official station Minister of the Gospel (Minister of the Gospel Clergyman, Priest, Rabbi, or Justice of the Peace) Residence No.50 Washington St st City or town of Natick 25 Certificate received by city or town clerk... (Month) (Day) CITY OR TOWN CLERK OR REGISTRAR

This form is for the zerown in which the cegisters or elects of continuous to FOR VIOLATION,	OFFICE OF THE SECRETARY DIVISION OF VITAL STATISTICS 1 PLACE OF MARRIAGE City or town 2 DATE OF MARRIAGE (Month) (Day) (Year)	Return of city or town of
	GROOM	BRIDE
the cit to the r of the PENAL	3 FULL NAME Edwin Eustar Johnson	13 FULL idelaide Vearson Hammond (If a widow or divorced, give also maiden name)
NG VENT Rent of sturned and day	4 AGE AT LAST 34 S COLOR (Years)	14 AGE AT LAST 3 15 COLOR White
ERMAN Fresid and resid the to FORBI	6 RESIDENCE AT TIME OF MARRIAGE 107 Woland Road	16 RESIDENCE AT TIME OF MARRIAGE Cambridge Wars -
S A Planter of the sector of t	7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 8 SINGLE, WIDOWED OR DIVORCED	17 NUMBER OF MARRIAGE (lst, 2d, 3d, etc.) 18 SINGLE, WIDOWED, OR DIVORCED STUGE
IS IS I	9 OCCUPATION OS CONTRACT	19 OCCUPATION museum assistant.
RVED INK-TH he marriple place, on ERTIFIC.	10 BIRTHPLACE Booten Vuasa (City or town) (State or country)	(City or town) (State or country)
ACK ACK out took HIS C	11 NAME OF FATHER Q	21 NAME OF Sterren a.
LIN I	12 MAIDEN NAME Josephine Milluderson	22 MAIDEN NAME Jama M. Chamblain
S C S S S S S S S S S S S S S S S S S S	23 THE INTENTION OF MARRIAGE by the above-named person	ons was duly entered by me in the records of the city (or town)
NFA NFA Sure SUR	according to law,	
A U and shift	Certificate issued [] 193	B by triduide H. Smht REGISTRAR
WITH ficial nized, ND B	(City or town) I HEREBY CERTIFY that the foregoing is a true	copy of the Certificate of Marriage issued
NLY.	by Frederick H. Brusse Clerk of (Name of clerk)	the city (or town) of
SOLUTION SERVICE SERVI	that the persons named therein were joined in marriage by me, a	age was solemnized in a church, give its NAME instead of street and number)
NO N	Ward in the city (es town) of Synthesis	
WRIT marris the crit	Name No Many Sa	Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
p i 10	Residence No.	., City or town of July 1000
. S. 11-25	25 Received by city June 1936	Kita La Ala

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return). This certificate must be delivered to the person before whom the mar-PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town..... (Do not enter name of village or section (Day) · (Month) (Year) of city or town) Intention No. 3 FULL NAME 13 FULL NAME GROOM BRIDE (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR AGE AT LAST 14 AGE AT LAST 2 2 BIRTHDAY..... BIRTHDAY (Years) (Years) 6 RESIDENCE 16 RESIDENCE NUMBER OF WIDOWED 18 WIDOWED 17 NUMBER OF OR DIVORCED MARRIAGE OR DIVORCED MARRIAGE (1st, 2d, 3d, etc.) (1st, 2d, 3d, OCCUPATION 18 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (State or country) (City or town) 11 NAME OF 21 NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the. (City or Town)according (Name of city or town) Certificate issued (City or Town Clerk or Registrar) (Day) (Year) Washington 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church, give its NAME instead of street and number) Holliston (Month) Justice of the Peace & (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Month

Month

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Mear

Mear

Month

Mo Washington Residence No.....St., City or town of 25 Certificate received by city or town clerk... CITY OR TOWN CLERK OR REGISTRAR (Month) (Dav)

FORM R-101 The Commonwealth of Massachusetts Office of the SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solumnize the same. City or Town.... (Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No. ... 13 FULL NAME BRIDE 3 FULL NAME GROOM (Also maiden name, if widowed or divorced 5 COLOR AGE AT LAST 21 14 AGE AT LAST BIRTHDAY..... (Years) (Years) 6 RÉSIDENCE 16 RESIDENCE South 6 marltono 7 NUMBER OF WIDOWED 17 NUMBER OF 18 WIDOWED MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st. 2d. 3d. (1st, 2d, 3d, 18 OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (State or country) (City or town) 11 NAME OF 21 NAME OF FATHER **FATHER** 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) (Name of city of town) (City or Town Clerk or Registrar) (Day) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. marlborough (Name of city or_town) (Month) (Day) (Year) Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) allowed St., City or town of ______ 38 25 Certificate received by city or town clerk. (Year) CITY OR TOWN CLERK OR REGISTRAR (Day)

FORM R-101	Division of	h of Massachusetts
FICAT FICAT side fo	This certificate must be delivered	to the person before whom the mar- the preceds to solumnize the same. (City or town making return)
ORD. EVS CERTI	City or Town	(Month) (Day) (Year) Intention No.
TED FORESTINGS THE THINS IS A PERMANENT RECCENT OF THIS ONE HUNDRED BOLLARS. See MARRIAGES.	3 FULL NAME GROOM Jeanis Comand Word 4 AGE AT LAST 3 5 COLOR BIRTHDAY 15 COLOR Wh. 6 RESIDENCE 2 ** Hermal St. Malden Mass 7 NUMBER OF State OR DIVORCED OR DIVORCED (1st. 2d. 3d. efc.) 9 OCCUPATION Salaman 10 BIRTHPLACE	13 FULL NAME BRIDE Devothy Thelma Jones (Also maiden name, if widowed or divorced) 14 AGE AT LAST 16 BIRTHDAY (Years) 16 RESIDENCE Uother Jr. South brough Mass 17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 18 WIDOWED (Ist, 2d, 3d, etc.) 19 OCCUPATION Sales guil
ADING BLACK Supplied, ALTI R VIOLATION be RETURN O	(City or town) (State or country) 11 NAME OF FATHER French Wood 12 MAIDEN NAME OF MOTHER HOTELS Marion	C(City or town) (State or country) 21 NAME OF FATHER Charles Jones 22 MAIDEN NAME OF MOTHER Susan Bowker
Y, WITH UNK d be carefully PENALTY FO we relating to 1	of	(City or Town)
-WRITE PLAINI information should RE FORBIDDEN; tracts from the lan .37. No. 1859.f.	Name of city or town Name Care Comments of City or town Name (Minister	solemnized in a church, give its NAME instead of street and number) (Month) (Day) (Year)
N. B of. AR AR ext	25 Certificate received by city or town clerk (Month) (Day)	1436 CITY OR TOWN CLERK OR REGISTRAR

FORM R-101	SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the mar- (City or town making return)
INTAIGN RESERVED FOR BINDING N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every of information should be carefully, supplied. ALTERATIONS AND ERASURES IN THIS CERTIFIC ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side extracts from the laws relating to the RETURN OF MARRIAGES. 100m.9.37. No. 1859-f.	1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solumnize the same. City or Town
	a FULL NAME GROOM Ray Earl Stockworld 4 AGE AT LAST 28 S COLOR BIRTHDAY (Years) 6 RESIDENCE 7 NUMBER OF MARRIAGE (1st. 2d. 3d. etc.) 9 OCCUPATION 10 BIRTHPLACE 11 NAME OF FATHER 12 MAIDEN NAME OF MOTHER 12 MAIDEN NAME OF MOTHER 13 FULL NAME BRIDE (Also maiden name, if widowed or divorced) 14 AGE AT LAST 28 IS COLOR BIRTHDAY (Years) 15 RESIDENCE 24 Pickards with widowed or divorced) 16 RESIDENCE 24 Pickards with widowed or divorced) 17 NUMBER OF pt
	(If marriage was solemnized in a church, give its (IAME instead apprect and number) (Name of Dy of two) (Name of Dy of two) (Month) (Month) (Minister of the Gospel, Clergyman, Priest, Rabbie or Justice of the Peace)
	25 Certificate received by city or town clerk Manu 25-38 Shapeled (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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St. City or town of 25 Certificate received by city or town clerk. Silvania (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR (Month)

City or Town)

(Year)

FORM R-101	Office of the secretary The Commonwealth	of Massachusetts
ery HIS See	DIVISION OF VITAL STATISTICS CERTIFICATE	OF MARRIAGE
<u>.</u> ⊢⊑	1 PLACE OF MARRIAGE This certificate must be delivered to t is to be contracted before he p	he person before whom the marriage occeds to solemnize the same. (City or Town)
SE.	1	
ES S	City or Town 2 Date of (Do not enter name of village or section of city or town)	(Month) (Day) (Year)
RECORD. ASURES IN DOLLARS		Intention No
SAS SAS SES.	GROOM 3 FULL 0	BRIDE
RMANENT RIS AND ERAS HUNDRED MARRIAGES.	NAME Vasqualy Joseph Moffo	NAME Gra Malharul Dertugs31
	4 AGE AT LAST 21 5 COLOR (Years)	14 AGE AT LAST 17 BIRTHDAY (Years)
BINDING S IS A PE TERATION TION, ON	6 RESIDENCE 143 Lucol St. AT TIME OF 143 Lucol St. MARRIAGE Mayboro 4 ass	16 RESIDENCE AT TIME OF MARRIAGE School St. Suithborrough mass
- = 1 < E	7 NUMBER OF AMARRIAGE OR DIVORCED ON 4 (1st, 2d, 3d, etc.)	17 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED
FOR NK-TH ied. A R VIOL I to the	9 OCCUPATION Forester	19 OCCUPATION homen
TK IN Police	10 BIRTHPLACE Marlboro (City or town) (State or country)	20 BIRTHPLACE South brough hiers (City or town) (State or country)
Wa Hall B	11 NAME OF Jumph huffo	21 NAME OF Jonis Berting 331
S Page	12 MAIDEN NAME Pasqualino Viallano	22 MAIDEN NAME OF MOTHER Louis Cartignetti
ARGIN RE WITH UNFAD n should be of FORBIDDEN; tracts from th	23 THE INTENTION OF MARRIAGE by the above-named persons w	(City or town)
MARGIN ', WITH U tion should RE FORBID extracts fi	of (Name of city or lown) Certificate issued (Month) (Day) (Year	by Charles Town Clerk or Registrar)
extreme A	(Month) (Day) (Year) (City of Town Clerk or Registrar)
MA AINLY, W ormation TE ARE I	I HEREBY CERTIFY that I joined the above-named per	sons in marriage at No. St. Clark St. (If marriage was solemnized in a church, give its NAME instead of street and number)
TE PL, of inf	Name of city or own) on (Month)	Official station. (Minister of the Gospel, Clergyman, Priest, Rabbi,
20,000. - WRI' item CER1	" "	(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Pcace) City or town of South torongs
10.'20. N. B.	25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-N1 The Commonwealth of Massachusetts CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town (Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No. ... 13 FULL NAME BRIDE 3 FULL NAME GROOM Placidia White Knowlton (Also maiden name, if widowed or divorced) Henry Field Placidia Whitedor 4 AGE AT LAST 14 AGE AT LAST BIRTHDAY31 BIRTHDAY.......35 White white (Years) (Years) 16 RESIDENCE 6 RESIDENCE 628 W. Call St. Tallahassee.Fla 999 Lake Shore Drive. Chicago. 18 WIDOWED 17 NUMBER OF 7 NUMBER OF 8 WIDOWED 2nd. OR DIVORCED OR DIVORCED MARRIAGE MARRIAGE 2nd. Divorced (1st. 2d. 3d, etc.) (1st, 2d, 3d, etc.) Divorced 14 OCCUPATION Scientist Housewife 10 BIRTHPLACE 20 BIRTHPLACE Cambridge, Mass. Chicago... (State or country) (State or country) 11 NAME OF 21 NAME OF FATHER FATHER Robb White Preston Gibson 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER Minna Field OF MOTHER Placidia Bridgers Certificate issued (City or Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at Nor (If marriage was splemnized in a church, give its NAME instead of street and number) (Day) (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) 37. Residence No. St., City or town of Jan ģ 25 Certificate received by city or town clerk...... (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

R-103 The Commonwealth of Massachusetts OFFICE OF THE SECRETARY CERTIFICATE OF MARRIAGE **DIVISION OF VITAL STATISTICS** For the use of Clergyman or magistrate solempizing marriage (See instructions on margin) 1 PLACE OF MARRIAGE City or town South barough Registered No. 2 DATE OF MARRIAGE June 2 1538 Return of city or town of South borough (Month) (Day) (Year) GROOM 13 FULL Placidia White 3 FULL NAME // (If a widow or divorced, give also maiden name) 15 COLOR 4 AGE AT LAST 35 14 AGE AT LAST BIRTHDAY 16 RESIDENCE AT TIME OF 628 MARRIAGE 6 RESIDENCE 999 Yell Shinz Dring W. Call St. Tallahasser Fla Chicago MARRIAGE 17 NUMBER OF 7 NUMBER OF MARRIAGE MARRIAGE (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.) 9 OCCUPATION 19 OCCUPATION Scientist)touse mk 10 BIRTHPLACE Chicag GU 20 BIRTHPLACE (City or town) (City or town) 11 NAME OF 21 NAME OF Pristing Gibson 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the city (or town) of South Grough according to law, this second day of June 1938 HEREBY CERTIFY that the foregoing is a true copy of the Certificate of Marriage issued June 2-1938.

Lack X Fankanks Clerk of the city (or town) of South Groups Massachusetts, and (Name of clerk) that the persons named therein were joined in marriage by me, at 70. A your brack From - Mana St (If marriage was solemnized in a church, give its NAME instead of street and number) South borough on June 2 1938 Mules Official station Glergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) ALTEI ONE 1 10,000. Residence No. 48 man St., City or town of Framery ham 5 Received by city or town clerk REGISTRAR

Office of the SECRETARY Division of VITAL STATISTICS PLACE OF MARRIAGE



The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

(City or town making return) This certificate must be delivered to the person before whom the mar-riage is to be contracted before he proceeds to solumnize the same.

City or Town	Marriage Registered No
(Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No
3 FULL NAME GROOM	13 FULL NAME BRIDE
John Joseph Ralieni	(Also maiden name, if widowed or divorced)
AGE AT LAST 2 G S COLOR BIRTHDAY	14 AGE AT LAST BIRTHDAY (Years) 15 COLOR
6 RESIDENCE	(Years) (Years)
do a de la constante	La tobaca al
7 NUMBER OF 8 WIDOWED OR DIVORCED	17 NUMBER OF NARRIAGE 18 WIDOWED OR DIVORCED
(1st, 2d, 3d, etc.)	(1st, 2d, 3d, etc.)
9 OCCUPATION	11 OCCUPATION
10 BIRTHPLACE	20 BIRTHPLACE
un Januar Stral	a Brotan mas
(City or town) (State or country)	(City or town) (State or country)
11 NAME OF FATHER OPEN Robert	21 NAME OF But while
12 MAIDEN NAME OF MOTHER	22 MAIDEN NAME OF MOTHER Counce Hanges
23 THE INTENTION OF MARRIAGE by the above-named person	as was duly entered by me in the records of the
	w, this (City or Town)
(Name of city or town)	
Certificate issued (Month) (Day) (Year	
24 I HEREBY CERTIFY that I joined the above-named persons	was solemnized in a church, give its NAME instead of street and number
South borough Meass.	0
[Name] of city or town	(Month) (Year)
	ster of the Gosper, Clergyman, Friest, Rabbi, of Justice of the Feace,
Residence No. 3 m To	St., City or town of South angle, Mare
	7 5 / 1
25 Certificate received by city or town clerk (Month) (Da	y) (Year) CITY OR TOWN CLERK OR REGISTRAR

R-103 The Commonwealth of Massachusetts OFFICE OF THE SECRETARY **DIVISION OF VITAL STATISTICS** (City or town) For the use of Clergyman or magistrate solemnizing marriage (See instructions on marrin) 1 PLACE OF MARRIAGE City or town Registered No. (Month) (Day) (Year) GROOM BRIDE 3 FULL 13 FULL NAME de NAME (If a widow or divorced, give also maiden name) 15 COLOR AGE AT LAST BIRTHDAY 14 AGE AT LAST BIRTHDAY (Years) (Years) 6 RESIDENCE AT TIME OF MARRIAGE 16 RESIDENCE AT TIME OF 7 NUMBER OF 17 NUMBER OF 18 SINGLE. MARRIAGE MARRIAGE OP DIVOPORT (1st. 2d. 3d. etc. (1st, 2d, 3d, etc.) 9 OCCUPATION 19 OCCUPATION 20 BIRTHPLACE (State or country) (State or country) (City or town) 21 NAME OF 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MARRIAGE by the above-named persons was duly entered by me in the records of the city (or town according to law, this HEREBY CERTIFY that the foregoing is a true copy of the Certificate of Marriage issued that the persons named therein were joined in marriage by me, at Nor..... (If marriage was solemnized in a church, give its NAME instead of street and number) Southbrough on June 19 Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) St., City or town of Residence No. 25 Received by city 1938 or town clerk REGISTRAR

	سيد الم	العلار		accordi	ng to law. t	his 25 =	, day of		19.25E
		(Name	of city or tow	n) 27 -	1938	_	~ ~ ~	a	
			(Month)	(Day)	(Year)	and	(City or Town Cler	k or Registrar)	
24	I HEREBY	Y CERTIFY	that I joined	the above-name	d persons in	marriage at No.	aint Mary	'o Church	St

Intention No.

(State or country)

(City or Town)

(If marriage was solemnized in a church, give its NAME instead of street and number) Month) (Day) (Year)

(Minister of the Gospel, Clergyman, Priest,St., City or town of

リリろと 25 Certificate received by city or town clerk....... (Month) (Year) CITY OR TOWN CLERK OR REGISTRAR (Day)

FORM R-101	Office of the SECRETARY Division of VITAL STATISTICS 1 PLACE OF MARRIAGE The Commonwealth of Massachusetts CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solumnize the same. (City or town making return)
N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every ite of, information should be carefully, supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATION ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side featurets from the laws relating to the RETURN OF MARRIAGES.	City or Town
	3 FULL NAME GROOM 3 FULL NAME GROOM 4 AGE AT LAST 42 5 COLOR BIRTHDAY (Years) 16 RESIDENCE 5 CULLULARY NAME BIRTHDAY (Years) 16 RESIDENCE 5 CULLULARY NAME (Years) 16 RESIDENCE 6 RESIDENCE 7 NUMBER OF 24 8 WINGWED (Ist. 2d. 3d. etc.) 18 WINGWED (Ist. 2d. 2d. etc.) 18 WINGWED (Ist. 2d. etc.) 18 WINGWED (Ist. 2d.
z őt	25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 The Commonwealth of Massachusetts Office of the SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town.... (Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No. 13 FULL NAME BRIDE 3 FULL NAME GROOM 5 COLOR 15 COLOR 4 AGE AT LAST 14 AGE AT LAST BIRTHDAY..... BIRTHDAY (Years) (Years) 6 RESIDENCE 16 RESIDENCE northborough WIDOWED 7 NUMBER OF 8 WIDOWED 17 NUMBER OF MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st. 2d. 3d. etc.) (1st, 2d, 3d, etc.) 11 OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF 21 NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) (Name of city on town) Certificate issued (Month) ((Year) (City or Town Clerk or Registrar) (Day) (If marriage was solemnized in a church, give its NAME instead of street and number) 1859.f. 1938 (Month) (Year) ģ (Minister of the Gospel, Clergeman, Priest, Rabbi, or Justice of the Peace)St., City or town of -6-m00 (Month) CITY OR TOWN CLERK OR REGISTRAR (Day) (Year)

100m-9-'37.

Office of the SECRETARY Division of VITAL STATISTICS



The Commonwealth of Massachusetts

CERI		<i>^</i> ~	. 🔾 .	IVIAN	KIAGE
This certific	ale must	be deliver	ed to the	berson befor	e whom the mar-
riage is to	be contra	cted befor	e he proc	eeds to solen	e whom the mar- inize the same.

(City or town making return)

CITY OR TOWN CLERK OR REGISTRAR

1 PLACE OF MARRIAGE This certificate must be delivere riage is to be contracted before	ed to the person before whom the mar. (City or town making return) is the proceeds to solumnize the same.		
City or Town	arriage Registered No		
(Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No.		
3 FULL NAME GROOM	13 FULL NAME BRIDE		
Rollo Genga	Aurelia E. De Marini (Also maiden name, if widowed or divorced)		
4 AGE AT LAST BIRTHDAY 28 Wh.	14 AGE AT LAST 26 Wh.		
6 RESIDENCE	16 RESIDENCE		
Pleasant St., Southborough	358 Waverly St., Framingham, Mass		
7 NUMBER OF first 8 WIDOWED OR DIVORCED Single	17 NUMBER OF MARRIAGE first OR DIVORCED Single		
Factory worker	15 OCCUPATION Factory Worker		
10 BIRTHPLACE Italy	20 BIRTHPLACE Boston, Mass.		
(City or town) (State or country)	(City or town) (State or country)		
II NAME OF FATHER Ercole Genga	Pietro De Marini		
12 MAIDEN NAME OF MOTHER Elisa Della Concatanz	22 MAIDEN NAME Luisa Saraco		
23 THE INTENTION OF MARRIAGE by the above-named persons of Southborough according to law, (Name of city or town)	(City or Town)		
Certificate issued (Month) (Day) (Year)	by Coll 2 Factority (City or Town Clerk or Registrar)		
24 I HEREBY CERTIFY that I joined the above-named persons in marriage at Alla Silver (If marriage was solemnized in a church, give its NAME instead of street and number)			
frammer of city or town)	(Month) / , 2 - (Day) (Mear)		
Name Officia (Minister Residence No. 336 Way Long St	er of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)		
25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR			

FORM R-101	Division of	th of Massachusetts
CORD. Every item HIS CERTIFICATE TO reverse side for	WWW CERTIFICATE	to the person before whom the mar- he proceeds to solumnize the same. (City or town making return)
EV Se	City or Town	rriage
S CE	(Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No.
ECC THI See	3 FULL NAME GROOM	13 FULL NAME BRIDE
NI S.	Xonis John Bestin 4331 Jr.	(Also maiden name, if widowed or divorced)
JINDING A PERMANEN ND ERASURES RED DOLLARS	4 AGE AT LAST 21 S COLOR WK	14 AGE AT LAST , 9 BIRTHDAY (Years) 15 COLOR
	6 RESIDENCE Saithburagh	16 RESIDENCE S& Huntington an Markhoro Mass
ONT B	7 NUMBER OF NARRIAGE OR DIVORCED (1st. 2d, 3d, etc.)	17 NUMBER OF MARRIAGE (1st. 2d, 3d, etc.) 18 WIDOWED OR DIVORCED or DIVORCED
K-T TIO ARB	9 OCCUPATION Farm w	11 OCCUPATION at home
SICVES CK IN LTERA OF M	10 BIRTHPLACE Framing Law Zucas	20 BIRTHPLACE Marlboragh
ESJ BLA ATIO	(City or town) (State or country)	(City or town) (State or country) 21 NAME OF
KG 1	FATHER Zome Bestenszei	FATHER Homes homeste
GIN ADIN Suppli R VI be R	12 MAIDEN NAME Contignation	22 MAIDEN NAME Rosz Leporte
ATR CONF FO FO to t	23 THE INTENTION OF MARRIAGE by the above-named persons	was duly entered by me in the records of the
H. aref.	of Santh Grand according to law,	this mentanth day of freday 1884
WIT NAI NAI relat	(Name of city or town)	
d b PE	Certificate issued (Month) (Day) (Year)	(City or Town Clerk or Registrar)
PINI Phoul P. P. P.	24 I HEREBY CERTIFY that I joined the above-named persons i	m marriage at No
PLAI Rion sh RIDDEI om the	Marchoos (II marriage was	Solemnizes in a church, give its NAME insteady of street and number)
RITE primatic ORBITE from	(Name of city or town)	(Month) (Day) (Year)
	Il Name State of the state of t	r of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
f. ind RE xtrac xtrac	Residence No. 26/2004 St.	, City or town of Marchan
N. B. – of of AR AR ext	25 Certificate received by city or town clerk (Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR

	Every THIS See	OFFICE OF THE SECRETARY DIVISION OF VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be delivered to the state of the property of the state of the stat	OF MARRIAGE he person before whom the marriage
	_ ×	is to be contracted before he pr	occeeds to solemnize the same. (City or Town)
	S I	City or Town 2 Date of Country of the Country of th	of Marriage Registered No. (Month) (Day) (Year)
	SE	of city or town)	Intention No
	RECASE	GROOM	BRIDE
	VENT D ER/ NDREC RIAGE	Frank Plummer Dunmire	13 FULL Mary Hunt (If a widow or divorced, give also maiden name)
ַ	PERMANENT RECORD. E INS AND ERASURES IN I NE HUNDRED DOLLARS. OF MARRIAGES.	4 AGE AT LAST 34 White	14 AGE AT LAST 30 White (Years)
	IS IS A PERNITE IN THE NEW ONE IN THE NEW ONE IN THE NEW OF THE NE	6 RESIDENCE AT TIME OF Celiople, Penn.	16 RESIDENCE Southville Road, AT TIME OF Southborough, Mass.
	HIS I	7 NUMBER OF second (SINGLE, WIDOWED, divorced OR DIVORCED (Decree on file	17 NUMBER OF MARRIAGE Sirst 18 SINGLE, WIDOWED, OR DIVORCED Single
202	INK—THI	9 OCCUPATION Naval Service man	Stenographer Stenographer
_	Fig. Fig.	10 BIRTHPLACE Celiople Penn (City or town) (State or country)	Southborough, Mass
KESERVED	BLA VALT	11 NAME OF Bert Dunmire	²¹ NAME OF HOWard Hunt
ת נו	UNFADING BLACK d be carefully sup DDEN; PENALTY from the laws relat	12 MAIDEN NAME OF MOTHER Jennie Cutler	22 MAIDEN NAME OF MOTHER Ida Liberty
'	UNFA Id be IDDEN from	23 THE INTENTION OF MARRIAGE by the above-named persons wa	as duly entered by me in the records of the TOWN
		of Southborough according to law	
	WITH ion shouse FORB extracts	Certificate issued August 22, 1938	by (City or Town Clerk or Registrar)
	-WRITE PLAINLY, WIN item of information see TETIFICATE ARE FC reverse side for extra	sons in marriage at No. (If marriage was solemnized in a church, give its w. (Day) (Year)	
	B.—WRITE item of CERTIFI	Residence No. Cephine Ry St.,	Official station. Allinister of the Gospel, Clergyman, Priest, Rubbi, or Justice of the Peace) City or town of
	ż	25 Certificate received by city or town clerk. (Month)	Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101	OFFICE OF THE SECRETARY DIVISION OF VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be delivered to t is to be contracted before he processing to the contracted	OF MARRIAGE the person before whom the marriage
RECORD. ASURES IN DOLLARS. S.	City or Town 2 Date of Contracted before he put of City or Town of City or town)	
REC SU D	GROOM	BRIDE
드용답됐	3 FULL Fred J. Quinn	13 FULL Rita A. Hayes NAME Rita A. Hayes (If a widow or divorced, give also maiden name)
ING PERMANENT IONS AND E ONE HUNDRI	4 AGE AT LAST 27 S COLOR Wh.	14 AGE AT LAST 24 Wh.
IDIR	6 RESIDENCE Southboro, Mass. AT TIME OF Southville Road,	16 RESIDENCE AT TIME OF AT TIME OF Framingham, Mass.
E S S S S	7 NUMBER OF MARRIAGE (1st. 2d, 3d, etc.) 1st. 8 SINGLE, WIDOWED, OR DIVORCED single	17 NUMBER OF MARRIAGE 1st. 18 SINGLE, WIDDWED, or DIVORCED single
X 1 57	9 occupation Paper worker	19 OCCUPATION Clerk
	Hopkinton, Mass. (City or town) (State or country)	City or town) (State or country)
ESERVED SING BLACK carefully supl PENALTY E he laws relati	11 NAME OF FATHER William A. Quinn	(City or town) (State or country) 21 NAME OF FATHER William Hayes
N RESE UNFADING d be caref DDEN; PEN from the la	12 MAIDEN NAME OF MOTHER Mary C. Loggia	22 MAIDEN NAME OF MOTHER Mary E. Finn
N REUNFAL	23 THE INTENTION OF MARRIAGE by the above-named persons w	as duly entered by me in the records of the Cown
SIN H UN ould SBIDI ts fr	of Southborough according to lav	v, this 28th day of August 19 38
MARGIN Y, WITH U tion should RE FORBID extracts fi	Certificate issued (Fonth) (Day) (Year	by City or Town Clerk or Registrar)
MARGIN PLAINLY, WITH L	I HEREBY CERTIFY that I joined the above-named per	sons in marriage at No. 24 Schwol
PLAI f info	2nd Ward Maningham on MM (Mouth)	sons in marriage at No. 2 4 Clovol (If marriage was solemnized in a church, give its NAME instead of street and number) (Day) (Year)
20,000. WRITE item of CERTIFIC reverse	Name John A. Weauly Residence No. 24, Whool St.	Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) City or town of My omile
10. ² 20.	as a second like the second li	Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101	office of the Secretary The Commonwealth	of Massachusetts
ery HIS See	DIVISION OF VITAL STATISTICS CERTIFICATE	OF MARRIAGE
	1 PLACE OF MARRIAGE This certificate must be delivered to to is to be contracted before he possible.	the person before whom the marriage roceeds to solemnize the same. (City or Town)
ARS	City or Town 2 Date	of MarriageRegistered No
ORI ES	(Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No.
SEC SUF DO	GROOM	BRIDE
T I	3 FULL NAME	13 FULL Mary Louise Bavari
VEN D I	Harold Armington Bauld	NAME Wary Louise Davari (If a widow or divorced, give also maiden name)
IG PERMANENT RECORD. E NS AND ERASURES IN T NE HUNDRED DOLLARS.	4 AGE AT LAST STOLOR Wh.	14 AGE AT LAST 3] Wh.
BINDING S IS A PERI TERATION, ONE HETURN OF IN	MARRIAGE Pramingham Mass	16 RESIDENCE AT TIME OF Pleasant Street, MARRIAGE Southboro, Mass.
6. ≒¬i∢∈	7 NUMBER OF MARRIAGE 1st SINGLE, WIDOWED, OR DIVORCED single	17 NUMBER OF MARRIAGE 1st OR DIVORCED single
\$ \\ ____\	9 OCCUPATION . Salesman	19 OCCUPATION Bookkeeper
C IN >	10 BIRTHPLACE Halifax, N. S.	20 BIRTHPLACE Southborough Mass
S 5 2 1 2	(City or town) (State or country)	(City or town) (State or country)
ERV G BL efully ENAL	FATHER JOHN G. BRUIG	FATHER Fred Bavari
ES ES	of Mother Adeline E. A. George	22 MAIDEN NAME OF MOTHER Giudetta Yezini
N RI UNFAI Id be from t	23 THE INTENTION OF MARRIAGE by the above-named persons w	as duly entered by me in the records of the TOWN
Z T D D D D D D D D D D D D D D D D D D	of Southborough according to law	
MARGIN Y, WITH U tion should RE FORBID extracts fi	Certificate issued // // // // (Day) (Year	by Chal 2 fail Ss (City or Town Clerk or Registrar)
MA PLAINLY, V information ICATE ARE side for ex	I HEREBY CERTIFY that I joined the above-named per	sons in marriage at No
E PLA f info	(Name of city or town) (Manth)	(Day) (Year)
20,000. - WRITE properties of CERTIFIC reverse s	Name Medicine & Doubleson	Official station (Minister of the Gospel, Clergyman, Priest, Rubbi, or Justice of the Peace)
2		City or town of Variation mass
10. ² 20.	25 Certificate received by city or town clerk (Mouth)	Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 The Commonwealth of Massachusetts Office of the SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town.... (Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No. 13 FULL NAME 3 FULL NAME BRIDE GROOM (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR AGE AT LAST 14 AGE AT LAST BIRTHDAY..... (Years) (Years) 6 RESIDENCE 16 RESIDENCE WIDOWED 7 NUMBER OF WIDOWED 17 NUMBER OF MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st. 2d. 3d, etc.) (1st. 2d. 3d. etc.) 18 OCCUPATION OCCUPATION 20 BIRTHPLACE هد ی (City or town) (State or country) (City or town) (State or country) 11 NAME OF 21 NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the.... (City or Town)according to law, this (Name of city or town Certificate issued (Month) (City or Town Clerk or Registrar) (Dav) (Year) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 1859-f. (If marriage was solemnized in a church, give its NAME instead of street and number (Month) (Year) ģ Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) St., City or town of Therene .6-m00 25 Certificate received by city or town clerk Sect. 143 1938 (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101	office of the secretary The Commonwealth	of Massachusetts
ery HIS	DIVISION OF VITAL STATISTICS CERTIFICATE	OF MARRIAGE
Ğ⊢	is to be contracted before be n	the person before whom the marriage roceeds to solemnize the same. (City or Town)
YRS	City or Town 2 Date	of MarriageRegistered No
CORE RES	City or Town 2 Date of (Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No
RECASE	GROOM	BRIDE
JENT D ER/ NDREC RIAGE	3 FULL NAME James Watt Eadie 3rd.	13 FULL Frances Slayton Kidder (If a widow or divorced, give also maiden name)
ING PERMANENT RECORD. IONS AND ERASURES IN ONE HUNDRED DOLLARS. OF MARRIAGES.		14 AGE AT LAST 22 White (Years)
S. A. N. O.	6 RESIDENCE AT TIME OF New York, N. Y.	16 RESIDENCE Oak Hill Road, AT TIME OF MARRIAGE Southboro, Mass.
= == ===	7 NUMBER OF MARRIAGE first 8 SINCLE, WIDOWED, OR DIVORCED single	17 NUMBER OF MARRIAGE first 18 SINGLE, WIDOWED, single (1st, 2d, 3d, ctc.)
FOR WK-TH ed. A s VIOL to the	9 OCCUPATION Actuarial Clerk	19 OCCUPATION at home
K I Politing	Boston, Mass.	Southborough, Mass.
VED LACK Y sup TY I	(City or town) (State or country)	(City or town) (State or country)
R BL	11 NAME OF James Watt Eadie, Jr.	21 NAME OF Dana Judson Kidder
Car Car the	12 MAIDEN NAME OF MOTHER Mabel Lathrop	22 MAIDEN NAME OF MOTHER Grace Slayton
N R UNFA	23 THE INTENTION OF MARRIAGE by the above-named persons w	as duly entered by me in the records of the COWN (City or town)
GIN CH U hould hould ots fr	of Southborough according to law	w, this sixth day of September, 19 38
VIT VIT SE LES	Certificate issued (Day) (Year	by City or Town Clerk or Registrar)
MA PLAINLY, V information ICATE ARE side for ex	I HEREBY CERTIFY that I joined the above-named per Ward Southborough on State (Month)	sons in marriage at No. Oak HIL Road (If marriage was solemnized in a church, give its NAME instead of street and number) 17 1938 instead of street and number)
20,(00. - WRITE item of CERTIFI	Name Robert F. Cheney	Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) City or town of
N. B	25 Certificate received by city or town clerk Lyful	15 1938 625abts
-	(4000)	Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 The Commonwealth of Massachusetts. Office of the SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE U (City or town making return) This certificate must be delivered to the person before whom the mar-PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town (Do not enter name of village or section (Month) (Day) · (Year) of city or town) Intention No. ... 13 FULL NAME 3 FULL NAME BRIDE GROOM Rolande Gagne Francis J. Morrill (Also maiden name, if widowed or divorced) 5 COLOR 14 AGE AT LAST 23 15 COLOR BIRTHDAY 36 4 AGE AT LAST Wh. Wh BIRTHDAY BINDING (Years) (Years) 6 RESIDENCE 16 RESIDENCE Gleason St., Marlboro, Mass. Southborough NUMBER OF 18 WIDOWED 8 WIDOWED 17 NUMBER OF first OR DIVORCED MARRIAGE OR DIVORCED MARRIAGE first single (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.) 9 OCCUPATION 19 OCCUPATION Truck Driver At home 10 BIRTHPLACE 20 BIRTHPLACE Brockton, Mass. Marlboro, Mass. (State or country) (City or town) (State or country) (City or town) 11 NAME OF 21 NAME OF FATHER Jeremiah Morrill FATHER Frank Gagne 12 MAIDEN NAME 22 MAIDEN NAME Ellen McQuade Stephanie Girard OF MOTHER OF MOTHER Town (City or Town) 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the according to law this nineteenth day of September Southborough (Name of city or town) Certificate issued (Day) (City or Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church, give its NAME instead of street and number) (Year) (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) St., City or town of Residence No... 25 Certificate received by city or town clerk... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101		th of Mussachusetts
F. f. f. f.	OFFICE OF THE SECRETARY DIVISION OF VITAL STATISTICS CERTIFICATE	OF MARRIAGE
item of extracts (0. 4905-c.	This certificate must be delivered to	the person before whom the marriage (City or town making return.) proceeds to solemnize the same.
Every it IFICAT o for e: '29. No.	City or Town	of Marriage Registered No. (Month) (Day) (Year) Intention No.
RD. CERT rse sid SOM-3-	3 FULL NAME GROOM	13 FULL NAME BRIDE
SCOF IIS C evers		Evelyn Laura Kelley (Maiden name, if widowed or divorced)
NDING A PERMANENT RECORD. Every ERASURES IN THIS CERTIFICA DOLLARS. See reverse side for	Robert Charles Keddie 4 AGE AT LAST 30 Wh.	(Maiden name, if widowed or divorced) 14 AGE AT LAST 18 Wh.
BINDING IS A PERMAIND ERASURED DOLLARS	6 RESIDENCE 283 West St. H. Keene, N. H.	16 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass.
MARGIN RESERVED FOR BIN UNFADING BLACK INK—THIS IS A FIGH SUPPLIED AND EFOR VIOLATION, ONE HUNDRED THE RETURN OF MARRIAGES.	7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) St SINGLE, WIDOWED, SINGLE OR DIVORCED	17 NUMBER OF MARRIAGE 1st SINGLE, SINGLE WIDOWED, OR DIVORCED
FOR	9 OCCUPATION Weaver	19 OCCUPATION At home
PRATI	Stoughton, Mass.	20 BIRTHPLACE Framingham, Mass.
ER CTE I MA	(City or town) (State or country) .	(City or town) (State or country)
RESI SLAC TON,	11 NAME OF Thomas Keddie	21 NAME OF PATHER Daniel F. Kelley
IN I	12 MAIDEN NAME OF MOTHER Josephine Lampron	22 MAIDEN NAME OF MOTHER Grace Emerson
ARG FADI V sur V VIC	23 THE INTENTION OF MARRIAGE by the above-named person	ns was duly entered by me in the records of the tOWN (City or town)
The For	of Southborough according to (Name of city or town)	law, this third day of September 1938
MAF WRITE PLAINLY, WITH UNFA information should be carefully FORBIDDEN; PENALLY FOR from the laws relating to the F	Certificate issued September 8, 1938 (Month) (Day)	(Year) by Control of Clerk or Registrar)
LY, ould PENA relat	24 I HEREBY CERTIFY that I joined the above-named pers	ons in marriage at No. St. Que's Classel St., (If marriage was solemnized in a church,
CAIN en sh en;	Ward Smullmangh on October	10, 1938 give its NAME instead of street and number)
E Pl natic IDDD	(Mont) Name On A Monti	Official station Pread
WRIT nforr 'ORB rom		(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
7.344.43	, , , , , , , , , , , , , , , , , , ,	City or town of Southorough, Manage
ž	25 Certificate received by city or town clerk (Month)	(Day) (Year) CITY OR TOWN CLERK OR REGISTRAR
	-	

FORM I		Division of	h of Massachusetts
very ite IFICAT side fe	. 6156 C	CERTIFICATE	of marriage to the person before whom the mar- he proceeds to solemnize the same. (City or town making return)
7 E T 8	35. No.	City or Town	rriage Registered No
R. C. C. S.		(Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No.
ECO THIS	50m-12	3 FULL NAME GROOM	13 FULL NAME BRIDE
FINE Si Si		aza Eldridge Gray Jr.	(Also maiden Tame, if widowed or divorced) Wirrells
IG SURES SURES	نها کسی	AGE AT LAST ZO BIRTHDAY (Years) S COLOR VL.	14 AGE AT LAST 9 BIRTHDAY (Years) 15 COLOR
SE SE	_	6 RESIDENCE	16 RESIDENCE
BINDING S A PERM ND ERASU NEED POT		SanTh bernigh	Landert Son Marlborargy
FOR B THIS IS JUN AN HUNDE RIAGES.		7 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED	17 NUMBER OF MARRIAGE OR DIVORCED (1st, 2d, 3d, etc.)
LE.,		9 OCCUPATION Gardey	19 OCCUPATION St line
RESERVED BLACK INK T. ALTERAL LATION, ONE		Boota Nuss	20 BIRTHPLACE Marlberay4
ES]		(City or town) (State or country)	(City or town) (State or country)
ETICE R		FATHER Con Clarify Trong	FATHER Reguest Street Merrells
ARGIN UNFADIR Ily suppli FOR VI	·	of Mother Shedy Emma Kennedy	22 MAIDEN NAME Lydis Eng Deette
E FEE	·	23 THE INTENTION OF MARRIAGE by the above-named persons v	was duly entered by me in the records of the (City or Town)
TH arefu		of Scatt brough according to law,	
WI		(Name of city or town) Certificate issued 4-143	Lucher to Fairbacks
W PE		(Month) (Day) (Year)	(City or Town Clerk or Registrar)
PLAINI DDEN; a the la		24 I HEREBY CERTIFY that I joined the above-named persons in (If marriage was	marriage at No. Outschool the Hole Triutte. St solemazed in a church, give its NAME instead of street and number)
TE matic fron		Name of city or fown)	(Month) (Day) (Year)
-WRI infort EE FO tracts		Minister Office of Minister	of the Gospel, Clergaman, Priest, Rabbi, or Justice of the Peace) City or town of Management of the Peace
N. B.		25 Certificate received by city or town clerk Gold 2	8-1938 On Farby
		(Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR
		· · · · · · · · · · · · · · · · · · ·	

FORM R-1	01	Office of the SECRETARY Division of	of Massachusetts
RECORD. Every item THIS CERTIFICATE See reverse eide for	o. 6156 C	VITAL STATISTICS 1 PLACE OF MARRIAGE CERTIFICATE This certificate must be delivered to riage 1s to be contracted before he	
ERT Prse	5. No.	City or Town 2 Date of Marri	
S CJ	50m-12-35.	of city or town)	(Month) (Day) (Year) Intention No.
ECC THE See	50m	3 FULL NAME GROOM	13 FULL NAME BRIDE
ZI S		Jum Phillpo	(Also maiden name, if widowed or divorced)
TG RMANE SURES		4 AGE AT LAST 5 COLOR BIRTHDAY (Years)	14 AGE AT LAST 24 15 COLOR Wh. (Years)
BINDIN IS A PER ND ERAS SRED DO		8 RESIDENCE Lemmed Jr. Suthburgy	Parker Way - Marthon Mar
FOR B THIS IS ONS AN HUNDR	ا	7 NUMBER OF NEW B WIDOWED OR DIVORCED OR DIVORCED	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 18 WIDOWED OR DIVORCED
Į₽. .%	:	9 OCCUPATION Großerch	19 OCCUPATION hum
RESERVED BLACK INK ALTERAT LATION, ONE IURN OF MA		Sathborngh news	20 BIRTHPLACE Hosth Canage Meass
ESI BLA JRN		(City or town) (State or country)	(City or town) (State or country)
> 30 M		FATHER John Phillips	21 NAME OF John Vinter
GGIN Suppl	j	12 MAIDEN NAME Gladge Rici	22 MAIDEN NAME OF MOTHER Trangeline West
MARGIN TH UNFADII refully suppl TY FOR VI	· ·	of	(City or Town)
WIT NAI Telat		(Name of city or town) Certificate issued	Gurly I fairbules
F P S		(Month) (Day) (Year)	(City or Town Clerk or Registrar)
PLAINI on shoul IDDEN; n the la	l	Wrot Vnowy 1	olemnized in a church, give its NAME instead of street and number)
WRITE PI information ? FORBIDI acts from			ation Osspel, Clergyman, Priest, Rabbi, or Justice of the Peace)
P. P		Residence No	City or town of Westlangs
ż		25 Certificate received by city or town clerk	1418 Showship
		(Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR
l		II .	

FORM R-161 The Commonwealth of Massachusetts Office of the SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. (City or town making return) PLACE OF MARRIAGE November 12. Southborough City or Town. 2 Date of Marriage..... Registered No..... (Do not enter name of village or section (Month) (Dav) . (Year) of city or town) Intention No. ... 13 FULL NAME 3 FULL NAME BRIDE GROOM Mary Lou Piedade Norman Rutty (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 4 AGE AT LAST 14 AGE AT LAST BIRTHDAY 18 White White BIRTHDAY..... (Years) (Years) 6 RESIDENCE 16 RESIDENCE Deep River. Saybrook. Conn. Conn. 7 NUMBER OF WIDOWED 17 NUMBER OF 18 WIDOWED MARRIAGE lst. OR DIVORCED MARRIAGE OR DIVORCED single lst. singl (1st. 2d. 3d. etc.) (1st, 2d, 3d, etc.) 9 OCCUPATION 19 OCCUPATION Wactory Worker At home 10 BIRTHPLACE 20 BIRTHPLACE Portugal, Deep River. Conn. (City or town) (State or country) (City or town) (State or country) 11 NAME OF FATHER Earl William Rutty NAME OF FATHER Joseph Martin Piedade 12 MAIDEN NAME 22 MAIDEN NAME Isabel Faisca OF MOTHER Mary Ellen Reynolds OF MOTHER (City or Town) November Southboroughaccording to law, this (Name_of city or_town) Certificate issued (City or Town Clerk or Registrar) (Month) (Year) (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) St., City or town of ż 25 Certificate received by city or town clerk...... (Month) (Dav) CITY OR TOWN CLERK OR REGISTRAR

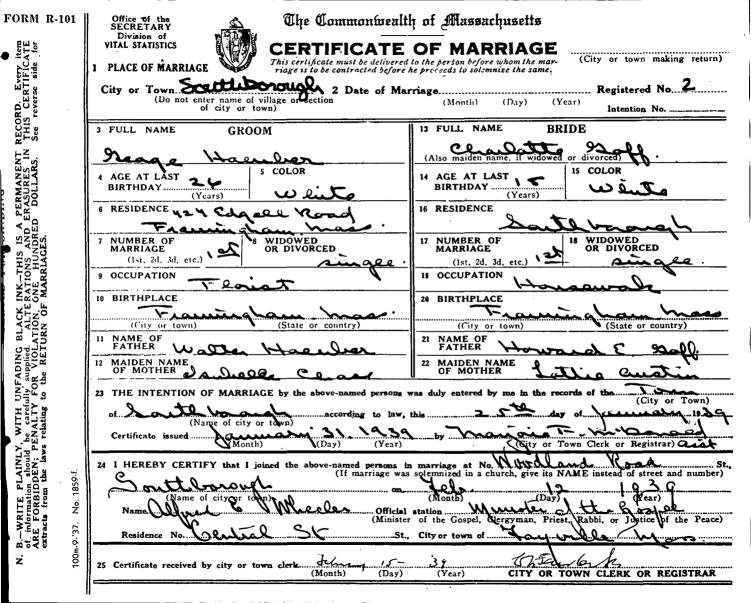
RECORD. Every item OTHIS CERTIFICATE See reverse side for W	Office of the SECRETARY Division of VITAL STATISTICS 1 PLACE OF MARRIAGE CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solumnize the same. City or Town
MARGIN RESERVED FOR BINDING N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK.—THIS IS A PERMANENT REC of information alould be carefully supplied. ALTERATIONS AND ERASURES IN THI ARE FORBIDDEN: PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See extracts from the laws relating to the RETURN OF MARRIAGES. 100m.9:37 No. 1859-6.	3 FULL NAME GROOM John N. Burke 4 AGE AT LAST 75 S COLOR BIRTHDAY (Years) 6 RESIDENCE 7 NUMBER OF P OR DIVORCED (1st. 2d. 3d. etc.) 9 OCCUPATION J. Ling Statin. Bry in 10 BIRTHPLACE 11 NAME OF NOTHER NAME OF NAME OF NAME OF NOTHER NAME OF NAME O

FORM R-101	SECRETARY Soft Sommonwealth, in Strassarifuseris
FICATE side for	
RD Eversion of the state of the	(Do not enter name of village or section (Month) (Day) (Year)
MARGIN RESERVED FOR BINDING TE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORI nation should be carefully supplied. ALTERATIONS AND ERASURES IN THIS (RBIDDEN); PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reffrom the laws relating to the RETURN OF MARRIAGES.	3 FULL NAME GROOM Land A Crelian 4 AGE AT LAST 2 SCOLOR BIRTHDAY (Years) 6 RESIDENCE Planny Jt. Sanillary (Years) 7 NUMBER OF MARRIAGE P. OR DIVORCED (1st. 2d. 3d. etc.) 9 OCCUPATION Sangle Man 10 BIRTHPLACE Francy Man Crelian (City or town) 11 NAME OF FATHER 12 MAIDEN NAME OF MOTHER 12 MAIDEN NAME OF MOTHER 13 FULL NAME BRIDE Land (Also maiden name, if widowed or divorced) 14 AGE AT LAST 2 SCOLOR BIRTHDAY (Years) 16 RESIDENCE 16 RESIDENCE 17 NUMBER OF SI WIDOWED OR DIVORCED (Ist. 2d. 3d. etc.) 18 WIDOWED OR DIVORCED (Ist. 2d. 3d. etc.) 19 OCCUPATION Sangle Man 10 BIRTHPLACE Francing Man (City or town) (State or country) 11 NAME OF FATHER 12 MAIDEN NAME OF MOTHER 12 MAIDEN NAME OF MOTHER 13 MARE OF Stangle Man 14 MAIDEN NAME OF MOTHER 15 COLOR MARRIAGE P. IS WIDOWED (Ist. 2d. 3d. etc.) 16 RESIDENCE 18 WIDOWED OR DIVORCED (Ist. 2d. 3d. etc.) 19 OCCUPATION Sangle Man 20 BIRTHPLACE Marriage of country) 21 NAME OF Stangle Man 22 MAIDEN NAME 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the City or Town) (Ist. according to law, this fruit, purally day of Cathery (Ist. according to law, this fruit, purally day of City or Town) (City or Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 17 Malliants (If marriage was solemnized in a church, give its NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number) NUMBER OF STANGLE NAME instead of street and number)
B.—WR. of infor ARE FC extracts	Residence No. 17 Washington Cours Residence No. 17 Washington Cours St., City or town of Manuforcy Mass.
ż	25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

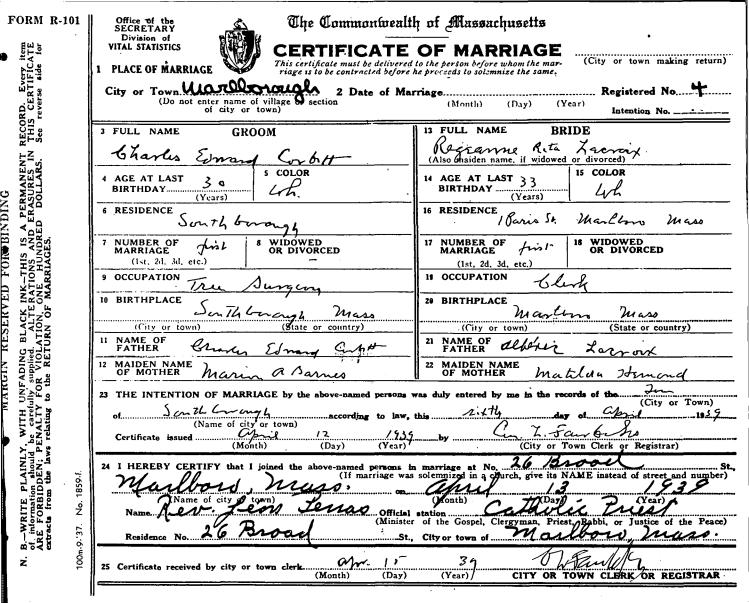
FORM R-101	Division of	th of Massachusetts
CORD. Every item 11S CERTIFICATE a reverse side for m-12-35, No. 6156 C		OF MARRIAGE It to the person before whom the mar- he proceeds to solemnize the same. (City or town making return)
ERT rse 5. N	City or Town 2 Date of Ma	rriage Registered No
SCORD. E HIS CER: ee reverse S0m-12-35. N	(Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No
ECO FHIS	3 FULL NAME GROOM	13 FULL NAME BRIDE
F. S.	Louis J Gratton	Meralda Marchand (Also maiden name, if widowed or divorced)
NG RMANE SOLLAR	4 AGE AT LAST 54 SIRTHDAY (Years) 5 COLOR	14 AGE AT LAST \$1 DECOLOR (Years)
BINDIN S A PER ND ERAS S.	6 RESIDENCE	16 RESIDENCE
KED A	o min would	45 am Plan Marloro Maso
FOR ETHIS IS AN HUNDI	7 NUMBER OF 2 = 8 WIDOWED OR DIVORCED (1st, 2d, 3d, etc.) widowed	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 18 WIDOWED OR DIVORCED OR DIVORCED
LEUR	9 OCCUPATION Laborer	19 OCCUPATION House much
RESERVED BLACK INK LALTERAL LATION ONE	10 BIRTHPLACE Irrland	20 BIRTHPLACE Marlbon Mass
SE AN	(City or town) (State or country)	(City or town) (State or country)
ETC 1	FATHER Louis Grallin	21 NAME OF Just Marchand
ARGIN UNFADIN Ily suppli FOR VI to the RU	12 MAIDEN NAME OF MOTHER Calleine Suggestan	22 MAIDEN NAME Expheric Courtin anche
E FO	23 THE INTENTION OF MARRIAGE by the above-named persons	was duly entered by me in the records of the (City or Town)
M TH aref LTY ting	of Scrith brough according to law,	4 + 14 / /s Thi
WIT WIT NAL relati	(Name of city or town) Certificate issued 1338	by Carly I Fairle des
d b PE	(Month) (Day) (Year)	(City or Town Clerk or Registrar)
PLAINI on shoul IDDEN; n the la	24 I HEREBY CERTIFY that I joined the above-named persons in the life marriage was	n marriage at No. 100 NAME instead of street and number 27
TE mati mati fron	(Name of city or town)	(Month) (Day) (Year)
.—WRI' i inform RE FO	(Minister	station
X ₩.242	Novelac	219' 1
~	25 Certificate received by city or town clerk (Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101	Office of the SECRETARY The Commonwealth of Massachusetts
T item ICATE ide for	Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE This certificate must be deligned to the Aurent before when the man. (City, or town, making, return)
RD. Every CERTIFIC reverse sid	City or Town Southburs 2 Date of Marriage 12 (Month) (Day) (Year) (Do not enter name of village or section of city or town) (Month) (Day) (Year) Intention No.
	City or Town Mouth From 1 2 Date of Marriage 12 10 1 Registered No. (Do not enter name of village or section of city or town) 3 FULL NAME GROOM 4 AGE AT LAST 3 SCOLOR BIRTHDAY (Years) 6 RESIDENCE 7 NUMBER OF MARRIAGE (1st. 2d. 3d. etc.) 8 WIDOWED OR DIVORCED (1st. 2d. 3d. etc.) 9 OCCUPATION 10 BIRTHPLACE (City or town) 10 BIRTHPLACE (City or town) 11 NAME OF FATHER GLAL PY CANAL 12 MAIDEN NAME OF MOTHER FATHER FATHER GLAL PARTY SUMMY SWIFT 12 MAIDEN NAME OF MOTHER FATHER GOT MOTHER FATHER FATHER FATHER GOT MOTHER FATHER
MAINTE PLAINLY, WITH UN of information should be carefully of extracts from the laws relating to extracts from the laws relating to	THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) (Name of city or town) (Name of city or town) (Month) (Day) (Year) (City or Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. After Markin Church. (If marriage was solemnized in a church, give its NAME instead of street and number) (Name of city or town) (Name of city or town) (Name of city or town) (Month) (Day) (Year)
	25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

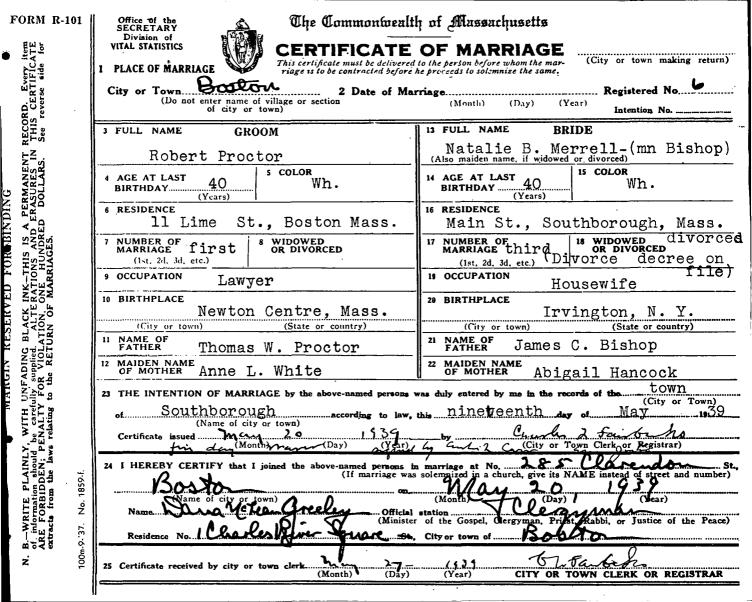
FORM R-10	01	Division of	h of Mussuchusetts
ery item FICATE side for		1 PLACE OF MARRIAGE CERTIFICATE This certificate must be delivered riage is to be contracted before	OF MARRIAGE to the person before whom the mar- he proceeds to solumnize the same. (City or town making return)
RD. Ev S CERTI reverse		City or Town Classification (Do not enter name of village of section of city or town)	(Donth) (Day) (Year) Intention No.
ZECO THIS See		3 FULL NAME GROOM	13 FULL NAME BRIDE
7 . 1 .		Gracomo & Mazzadria	(Also maiden name, if widowed or deerced)
RMANE SURES		4 AGE AT LAST 35" S COLOR BIRTHDAY (Years) S COLOR	14 AGE AT LAST 24 15 COLOR BIRTHDAY (Years) 44
PERA ERA D D		6 RESIDENCE	16 RESIDENCE
IS A AND DREI ES.	'"	7 NUMBER OF 1 8 WIDOWED	17 NUMBER OF 18 WIDOWED
HIS NS HUN IAGI		MARRIAGE PV OR DIVORCED (1st. 2d. 3d. etc.)	MARRIAGE OR DIVORCED (1st, 2d, 3d, etc.)
K-T	ļ	9 OCCUPATION Action	11 OCCUPATION Machine Inspector
CK IN LTERA OF M		10 BIRTHPLACE , Staly	20 BIRTHPLACE South berough livers
BLA ATIO JRN		(City or town) (State or country) 11 NAME OF	(City or town) (State or country)
ETI ETI	ļ	FATHER Question Mazsadria	FATHER Louis Butuaggi
Supp Supp R V The I		OF MOTHER Gallang Belli	22 MAIDEN NAME Joning Cartifue To
efully For FO		23 THE INTENTION OF MARRIAGE by the above-named persons of	(City or Town)
ATT Sar (AL)		of Suthburgh according to law, (Name of city or town)	
P EN		Certificate issued (Month) (Day) (Year)	(City or Town Clerk or Registrar)
PLAINI on shoul DDEN;	1859-f.	24 I HEREBY CERTIFY that I joined the above-named persons in (If marriage was	marriage at No. att. Annie Church St., solemnized in a church, give its NAME instead of street and number) January 28th 1939
RITE PLA formation s FORBIDDI to from th	No.	(Name of city or town) Name Official	(Month) (Day), (Year)
B.—WRI of infori ARE FC extracts		// / / / / / / / / / / / / / / / / / /	of the Gospel, Clergyman Priest, Rabbi, or Justice of the Peace) City or town of
X 8 2 4 8	100m-9-'37		(Year) CITY OR TOWN CLERK OR REGISTRAR
l			



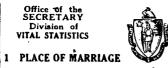
FORM R-101	Office of the SECRETARY The Commonwealth of Massachusetts
FICATE	Division of VITAL STATISTICS 1 PLACE OF MARRIAGE CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solumnize the same. (City or town making return)
RD. Ever CERTII	City or Town Warlow Clare Section (Month) (Day) (Year) (Do not enter name of village Section of city or town) (Month) (Day) (Year) Intention No
"LACK INK-THIS IS A PERMANENT RECORD ALTERATIONS AND ERASURES IN THIS C TION, ONE HUNDRED DOLLARS. See rev	of city or town) Intention No
N. B.—WRITE PLAINLY, WITH UNFADING BL of information should be carefully supplied. ARE FORBIDDEN; PENALTY FOR VIOLAT extracts from the laws relating to the RETUR 100m-9-37. No. 1859-f.	12 MAIDEN NAME OF MOTHER 12 MAIDEN NAME OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) (Name of city or town) Certificate issued (Month) (Day) (Year) City or Town Clerk or Registrar) 4 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church, give its NAME instead of street and number) (Name of city or town) (Month) (Day) (Year) 25 Certificate received by city or town clerk (Month) (Day) (Year) (Year) CITY OR TOWN CLERK OR REGISTRAR



RD. Every item CERTIFICATE Reverse side for W	Division of vital statistics 1 PLACE OF MARRIAGE CERTIFICATE This certificate must be delivered riage is to be contracted before	OF MARRIAGE (Ito the person before whom the marke proceeds to solomnize the same. (Month) (Day) (Year) Intention No.
N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK.—THIS IS A PERMANENT RECORI of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS (ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED, DOLLARS. See re extracts from the laws relating to the RETURN OF MARRIAGES.	Walter R. Emerson 4 AGE AT LAST 35 BIRTHDAY (Years) 6 RESIDENCE 290 Prospect St., Manchester, N.H. 7 NUMBER OF MARRIAGE 1st (St. 121, 3d, etc.) 9 OCCUPATION Newspaper, Copy Reader 10 BIRTHPLACE Manchester, N.H. (Citylor town) (State or country) 11 NAME OF FATHER Abraham F. Emerson 12 MAIDEN NAME OF MOTHER Emma Smith 23 THE INTENTION OF MARRIAGE by the above-named persons of Southborough (Name of city or town) (Day) (Year) 24 I HEREBY CERTIFY that I joined the above-named persons to (If marriage was (Name of city or town) (Minister) (Name of city or town) (Official (Minister)) (Name of city or town) (Official (Minister))	Maybelle B. Joyal (Also maiden name, if widowed or divorced) 14 AGE AT LAST 28 BIRTHDAY (Years) 16 RESIDENCE Farwell Building, Claremont 17 NUMBER OF MARRIAGE 1st (1st. 2d. 3d. etc.) 18 OCCUPATION Teacher 20 BIRTHPLACE Lawrence, Mass. (City or town) (State or country) 21 NAME OF FATHER Peter M. Joyal 22 MAIDEN NAME Belle Byron was duly entered by me in the records of the Town (City or Town) this eighth day of April 1s 39 (City or Town Clerk or Registrar) m marriage at No. (City or Town Clerk or Registrar) m marriage at No. (City or Town Clerk or Registrar) (Month) (Day) (Year)
	(Month) (Day)	(Year) CITY ON TOWN CLERK OR REGISTRAR



Office of the SECRETARY Division of VITAL STATISTICS



The Commonwealth of Massachusetts

CERTIFICATE	OF MARRIAGE	 	 		٠.
This certificate must be delivered	to the person before whom the mar- he proceeds to solemnize the same,		making		
				~	

City or Town Southborough 2 Date of Mar	riage Registered No
(Do not enter name of village of section of city or town)	(Month) (Day) (Year) latention No.
3 FULL NAME GROOM	13 FULL NAME BRIDE
Lannie Coleman cerriturales la	(Also maide name, if widowed or divorced)
4 AGE AT LAST 23 5 COLOR BIRTHDAY (Years) 5 COLOR	14 AGE AT LAST BIRTHDAY (Years) 15 COLOR
6 RESIDENCE	16 RESIDENCE
Southboard h.	Vacadeug, California
7 NUMBER OF 8 WIDOWED OR DIVORCED	17 NUMBER OF NARRIAGE OR DIVORCED
(1st, 2d, 3d, etc.)	(1st, 2d, 3d, etc.)
9 OCCUPATION	19 OCCUPATION
10 BIRTHPLACE	20 BIRTHPLACE
(City or town) (State or country)	(City or town) (State or country)
11 NAME OF James C. Christerlas.	21 NAME OF FATHER CLOSES SEE S
12 MAIDEN NAME OF MOTHER	22 MAIDEN NAME OF MOTHER
23 THE INTENTION OF MARRIAGE by the above-named persons v	(City or Town)
(Name of city or town)	this 125, do of 1939
	by (Qy or Town Clerk or Registrar)
A LUNDON CONTROL OF THE CONTROL OF T	V. 1/ C. 1
24 I HEREBY CERTIFY that I joined the above-named persons in (If marriage was	solemnized in a church, give its NAME instead of street and number)
gayville	28th May 28th 1939
(Name for city on town)	(Month) (Pear)
NameOfficial (Minister	of the Gospel, lergyman, Priest Rabbi, or Justice of the Peace)
	City or town of an analy
,	
25 Certificate received by city or town clerk (Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 V The Commonwealth of Massachusetts Office of the SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage..... (Do not enter name of village or section (Year) (Month) (Day) ' of city or town) Intention No. 13 FULL NAME 3 FULL NAME BRIDE GROOM (Also maiden name, if widowed or divorced) COLOR AGE AT LAST 14 AGE AT LAST BIRTHDAY..... BIRTHDAY Parento consetteres (Years) 16 RESIDENCE 6 RESIDENCE 143 7 NUMBER OF WIDOWED. OR DIVORCED 17 NUMBER OF OR DIVORCED MARRIAGE MARRIAGE (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.) 9 OCCUPATION 18 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of (City or Town)according to law, this (Name of city or town) Certificate issued (Month) (Day) ity or Town Clerk or Registrard (Year) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at 240. ... (If marriage was solemnized in a church, give its NAME instead of street and number) (Month) Priest, Rabbi or Justice of the Peace) St., City or town of Marlborough, 25 Certificate received by city or town clerk.... (Month) (Day) + (Year) CITY OR TOWN CLERK OR REGISTRAR

GUARDIAN'S PERMISSION TO MARRY

Under General Laws, Chap. 207, Sections 27 and 34

·	, Mass., V	4 cy 18 1931
To the Clerk of	:	•
I hereby certify that I am the father	an	nd legal guardian of
Elonia of alterini	that she is	years
of age, and that I give my full and free con		.1144.
license be issued.		· · · · · · · · · · · · · · · · · · ·
Witness my hand this Est Tit	day of May	193
Witness my hand this Estant.	micfael D	allemi
I hereby certify that the foregoing is a	correct duplicate of a	document on file in
this office.	4	•
Attest:	and Jambaka	Town Clerk.

If it is necessary to give notice in two cities or towns of the intention of marriage of a minor, the clerk who first takes the consent of the parent or guardian shall take it **in duplicate**, retaining one copy, and giving the other, duly attested. to the person who obtains the certificate, to be given to the clerk issuing the second certificate.

The Commonwealth of Massachusetts FORM R-101 Office of the SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. City or Town Erramingham 2 Date of Marriage..... Registered No.... (Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No. 13 FULL NAME BRIDE 3 FULL NAME GROOM (Also maiden name, if widowed or divorced) 14 AGE AT LAST 15 COLOR AGE AT LAST BIRTHDAY..... BIRTHDAY (Years) (Years) 16 RESIDENCE 6 RESIDENCE 9 mca WIDOWED 17 NUMBER OF 7 NUMBER OF WIDOWED OR DIVORCED OR DIVORCED MARRIAGE MARRIAGE (1st. 2d, 3d, etc.) (1st. 2d. 3d. etc. 14 - OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the...... City or Town) according to law, this (Name of city or town) Certificate issued (Month) (Day) City or Town Clerk or Registrare 24 I HEREBY CERTIFY that joined the above-named persons in marriage at No. 1151- Xanidul. 11 1859.f. (If marriage was solemnized in a church, give its NAME instead of street and number) Official station YUMBULL of the Boshel (Minister of the Gospel, Clergyman, Priest, Rabbi or Justice of the Peace) KLAY St. City or town of Fitaming Kam, Mass. 25 Certificate received by city or town clerk......(Month) (Day) CITY OR TOWN CLERK OR REGISTRAR (Year)

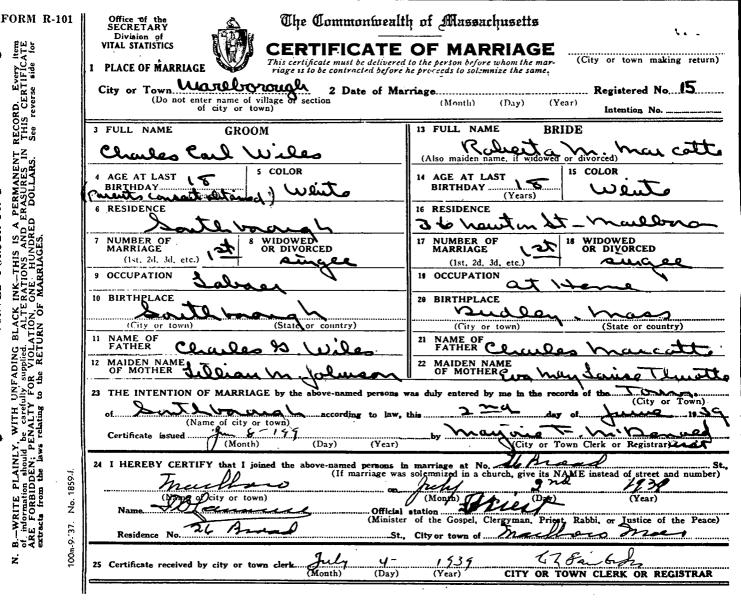
FORM R-101	SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE	City or town making return)
)RD. Every i S. CERTIFICA reverse side	This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solumnize the same. City or Town. South 2 Date of Marriage. (Do not enter name of village of section (Month) (Day) (Year)	41
G MANENT RECC URES IN THIS SLLARS. See	3 FULL NAME GROOM 3 FULL NAME BRIDE CAlso maiden name, if widowed or	don
BLINDIN IS A PER AND ERAS IDRED DC ES.	6 RESIDENCE 16 RESIDENCE 17 NUMBER OF	WIDOWED OR DIVORCED
ED FORG	MARRIAGE (1st, 2d, 3d, etc.) 9 OCCUPATION 10 BIRTHPLACE MARRIAGE (1st, 2d, 3d, etc.) 11 OCCUPATION 20 BIRTHPLACE	or bivorces
KESEKY G BLACK d. ALTE. LATION, TURN OF	(City or town) (State or country) (City or town) 11 NAME OF FATHER 21 NAME OF FATHER	(State or country)
MARGIN UNFADIN fully supplie Y FOR VIC	22 MAIDEN NAME OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records	of the (City or Town)
LY, WITH	(Name of city or town) Certificate issued (Month) (Day) (Day) (City or Town)	Clerk or Registrar)
-WRITE PLAIN information should be to the trom the form the from t	Name (Minister of the Gospel, Clerkyman, Priest, R	(Yeat)
N. B.—. of. i ARE extra	25 Certificate received by city or town clerk Jun 13-1539 628aut	Sak N CLERK OR REGISTRAR

FORM R-101	Office of the SECRETARY Division of VITAL STATISTICS OFFICE OF MARRIAGE
Every item ERTIFICATE erse side for	1 PLACE OF MARRIAGE CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solumnize the same. (City or town making return)
D. Ev. CERTI	City or Town. South Society 2 Date of Marriage. Registered No. 16 (Do not enter name of village or section of city or town) (Month) (Day) (Year) Intention No.
Y, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Everally supplied. ALTERATIONS AND ERASURES IN THIS CERTIFEMENTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse is relating to the RETURN OF MARRIAGES.	
	12 MAIDEN NAME OF MOTHER OTHER OF MOTHER OF MOTHER OF MOTHER OF MOTHER OTHER
	23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) of (Name of city or town) Certificate issued (Month) (Day) (Year) (City or Town Clerk or Registrar)
N. B.—WRITE PLAINLY of information should ARE FORBIDEN: extracts from the law 00m.9:37 No. 1859.f.	24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No
X. X. A A A A A A A A A A A A A A A A A	25 Certificate received by city or town clerk 13 1534 (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101	SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return)
ECORD. Every it THIS CERTIFICA See reverse side	1 PLACE OF MARRIAGE This ever little was de active at the person or for a month marriage is to be contracted before he proceeds to solumnize the same. City or Town Southiborough 2 Date of Marriage (Do not enter name of village or section of city or town) (Month) (Day) (Year) Intention No.
ENT RS.	3 FULL NAME GROOM Aldino Boul Berte 4 AGE AT LAST 3 FULL NAME BRIDE Maria Julia (Also maiden name, if widged or divorced) 14 AGE AT LAST 23 15 COLOR
IN DING A PERMAN D ERASURE RED DOLLA	6 RESIDENCE Wary St. Francy Law Mass BIRTHDAY (Years) 16 RESIDENCE Latignan Road - South Groungs
TO FOREB	7 NUMBER OF MARRIAGE OR DIVORCED (1st. 2d. 3d. etc.) 9 OCCUPATION Sandauer 8 WIDOWED OR DIVORCED (1st, 2d. 3d. etc.) 18 OCCUPATION Ct home
RESERVE BLACK IN LATER LATION, OI FURN OF N	10 BIRTHPLACE Framing Lam Mass (City or town) (State or country) 11 NAME OF FATHER RATE DOLLARS 20 BIRTHPLACE (City or town) (State or country) 21 NAME OF FATHER CONSTRUCTOR
TARGIN UNFADINC UNFADINC UNFADINC FOR VIO TO the RE	12 MAIDEN NAME OF MOTHER O
IITE PLAINLY, WITH rmation should be carefi ORBIDDEN; PENALTY from the laws relating No. 1859-f.	(Name of city or town) Certificate issued (Month) (Day) (Day) (City or Town Clerk or Registrar)
	Name John W. Wartin Official station Press
N. B.—WR of. info ARE F extracts	25 Certificate received by city or town clerk June 19- 1931 (7.5 Aurlow)
	(Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

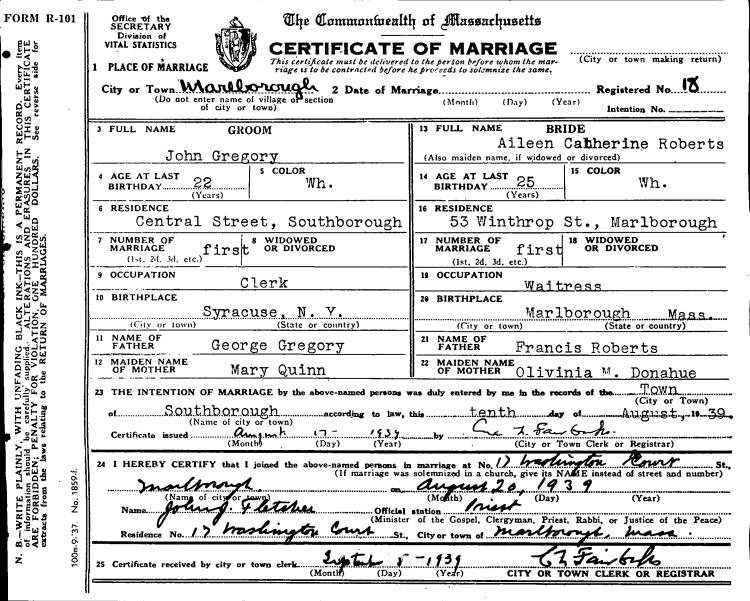
FORM R-101	Office of the SECRETARY Division of VITAL STATISTICS 1 PLACE OF MARRIAGE The Commonwealth of Massachusetts CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solomnize the same. (City or town making return)
CORD. Every its HIS CERTIFICAT a reverse side f	City or Town South Council 2 Date of Marriage Registered No. 13. (Do not enter name of village of Section (Month) (Day) (Year) Intention No.
N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK.—THIS IS A PERMANENT RECOR of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See recatacts from the laws relating to the RETURN OF MARRIAGES.	3 FULL NAME GROOM 4 AGE AT LAST BIRTHDAY (Years) 5 COLOR 6 RESIDENCE 7 NUMBER OF MARRIAGE (Ist, 2d, 3d, etc.) 9 OCCUPATION 10 BIRTHPLACE (City or town) 12 MAIDEN NAME 13 FULL NAME BRIDE (Also maiden ame, if widowed or divorced) 14 AGE AT LAST BIRTHDAY (Years) 15 COLOR 16 RESIDENCE 16 RESIDENCE 17 NUMBER OF MARRIAGE (Ist, 2d, 3d, etc.) 18 WIDOWED OR DIVORCED (Ist, 2d, 3d, etc.) 19 OCCUPATION 10 BIRTHPLACE 28 BIRTHPLACE 20 DIVORCED (City or town) (City or town) (State or country) 21 NAME OF FATHER FATHER 22 MAIDEN NAME
	23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) of (Name of city or town) Certificate issued (Ronth) (Day) (Yest) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church, give its NAME instead of street and number) (Name of city or town) (If marriage was solemnized in a church, give its NAME instead of street and number) (Name of city or town) (Name of city or town) (If marriage was solemnized in a church, give its NAME instead of street and number) (Minister of the Gospel, Clergyman, Priest, Robbi, or Justice of the Peace) Residence No. 25 Certificate received by city or town clerk (Month) (Day) (Year) (City or Town) (City or Town)

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the mar-1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solumnize the same. City or Town Wareborough 2 Date of Marriage..... Registered No.... (Do not enter name of village section (Month) (Day) (Year) of city or town) Intention No. BRIDE 3 FULL NAME 13 FULL NAME GROOM (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR AGE AT LAST 14 AGE AT LAST BIRTHDAY..... سويد (Years) (Years) 6 RESIDENCE 16 RESIDENCE 7 NUMBER OF WIDOWED 17 NUMBER OF WIDOWED MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st. 2d. 3d. etc.) (1st. 2d. 3d. etc.) 18 OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF 21 NAME OF FATHER FATHER \ 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) according to law, this (Name of city or town) Certificate issued (Month) (City or Town Clerk or Registrar) (Day) (Year) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 1859-f. (If marriage was solempized in a church, give its NAME instead of street and number) (Year) ģ Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) City or town of 25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

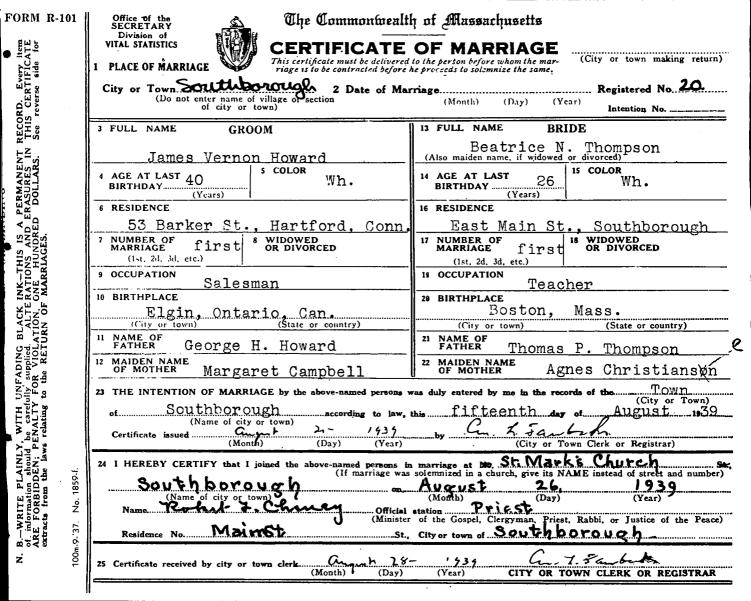


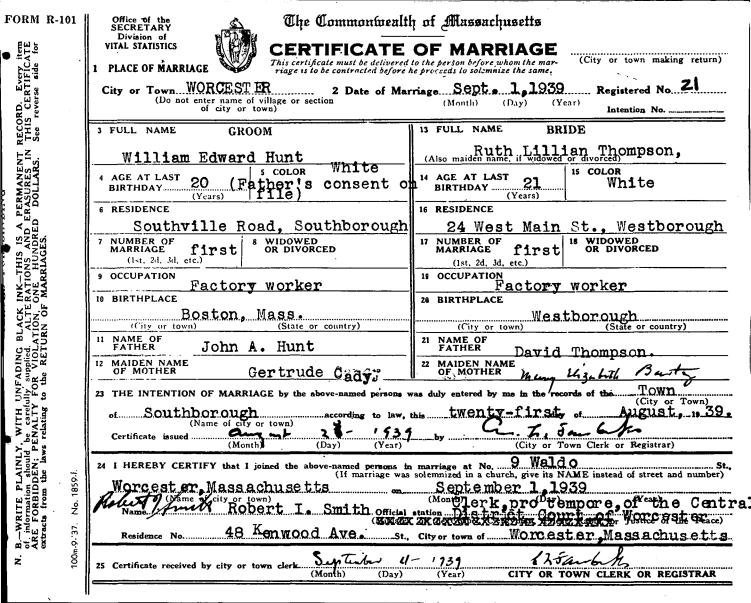
ORM R-101	Office of the SECRETARY The Commonwealt	h of Massachusetts	
item ATE for	,	OF MARRIAGE to the person before whom the mar- (City or town making return)	
FIC side	1 PLACE OF MARRIAGE riage 15 to be contracted before	he proceeds to solumnize the same.	
S E	City or Town Lengthentin 2 Date of Ma	rriage August 12-1934 Registered No. 16.	
ORD. Every IS CERTIFIC reverse side	(Do not enter name of village or section of city or town)	(Month) (Day) (Year)' Intention No.	
ECO THIS	3 FULL NAME GROOM	13 FULL NAME BRIDE	
S. S.	Hugh J. Heckle	Evelee V. Chadwick (Also maiden name, if widowed or divorced)	
RMANE SURES JOLLAR	4 AGE AT LAST 23 White (Years)	14 AGE AT LAST 23 White (Years)	
A PEI D ERA ED D	6 RESIDENCE Southboro, Mass.	Southboro, Mass.	
HIS IS VS AN HUNDR IAGES.	7 NUMBER OF first 8 WIDOWED OR DIVORCED (1st. 2d. 3d. etc.)	17 NUMBER OF MARRIAGE first OR DIVORCED (1st, 2d, 3d, etc.)	
K-TH TION: E H ARRL	9 OCCUPATION Production Clerk	19 OCCUPATION Clerical	
RAN ON M	10 BIRTHPLACE	29 BIRTHPLACE	
ON.	Hopkinton, Mass.	Manchester, Vt.	
BL/A	(City or town) (State or country) 11 NAME OF	(City or town) (State or country)	
NG Fied. TOLL	FATHER Hugh Heckle	FATHER Bertie A. Chadwick	
Suppl	of Mother Lucy Owen	22 MAIDEN NAME OF MOTHER Christie Hilliard	
FOJE FOJE	23 THE INTENTION OF MARRIAGE by the above-named persons	was duly entered by me in the records of the	
arefu TY ing	of Southborough according to law,	this twenty-ninthay of July 19 39	
WI.	(Name of city or town) Certificate issued August 4 1939	Ch. x. Fa. b-Rs	
LY.	(Month) (Day) (Year)	(City or Town Clerk or Registrar)	
RITE PLAIN) ormation shou FORBIDDEN; is from the la No. 1859-f.			
RITE primat FORB FORB	Name haster of Torler Official	station	
N. B.—WI of. info ARE i extract	Residence No. 2 5 Winnemay St.	City or town of Mattick	
X 100m	25 Certificate received by city or town clerk (Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR	
į.			

	City or Town 5570 City or Town 2 Date of Ma (Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No
0	3 FULL NAME GROOM	13 FULL NAME BRIDE
	Cortland A. Ruggles	Harriet Gertrude Jackson (Also maiden name, if widowed or divorced)
	4 AGE AT LAST 25 Wh.	14 AGE AT LAST 25. Wh.
)	6 RESIDENCE East Main Street, Southboro,	16 RESIDENCE 30 Main St., Framingham,
TAGES	7 NUMBER OF 1st 8 WIDOWED OR DIVORCED (1st. 2d. 3d. etc.)	17 NUMBER OF MARRIAGE 1St. 18 WIDOWED OR DIVORCED
ARRI.	9 OCCUPATION Pharmacist	19 OCCUPATION Dental Hygienist
or N	10 BIRTHPLACE Southborough (City or town) (State or country)	20 BIRTHPLACE Mansfield, Mass.
TURN	11 NAME OF Albert W. Ruggles	(City or town) (State or country) 21 NAME OF FATHER Robert Jackson,
a RE	12 MAIDEN NAME . OF MOTHER Pearl Hutt	22 MAIDEN NAME NOTHER Nellie Chapman
ws relating to t	of Southborough according to law, (Name of city or town) Certificate issued (Month) (Day) (Year)	(City or Town)
extracts from the law 00m-9-37. No 1859-f.	Name Paris ficity or top Parker Official	marriage at No. St. Male un Church is solemnized in a church, give its NAME instead of street and number (Mo(th) (Day) (Year) station of the Gospel, Clergy nath, Priest, Rabbi, or Justice of the Peace

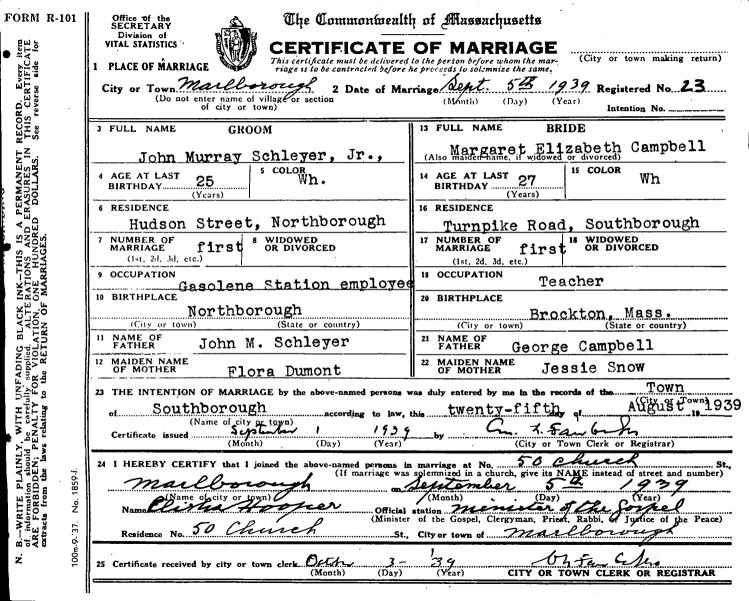


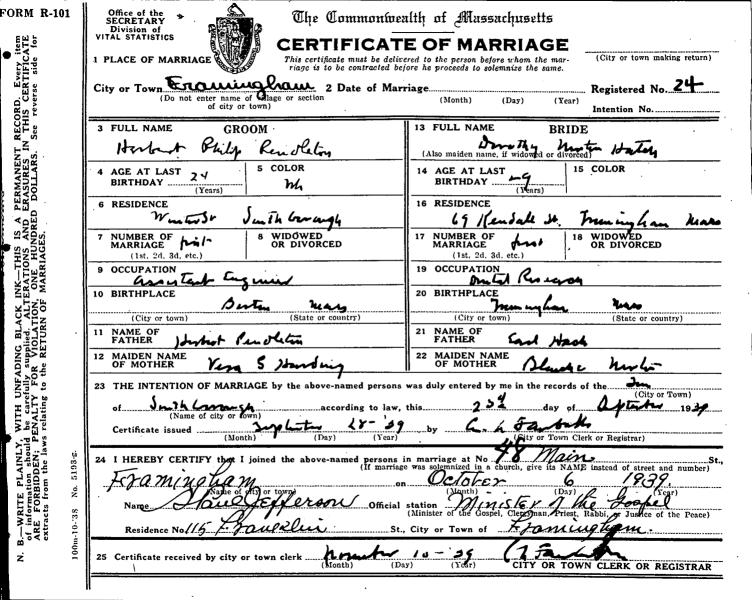
HIS CERTIF	City or Town. Court the riage is to be contracted before it	(Montii) (Day) (Year) Intention No
S. S.	Henry Domenic Baldelli	Lena Angeline Bertonazzi (Also maiden name, if widowed or divorced) 15 COLOR
ERASURES ED DOLLA	4 AGE AT LAST 24 7h. (Years) 6 RESIDENCE Cordaville Road, Southborough	16 RESIDENCE Cherry St., Southborough
IONS AND HUNDRE RRIAGES.	7 NUMBER OF 1st 8 WIDOWED OR DIVORCED (1st. 2d. 3d. etc.)	17 NUMBER OF MARRIAGE 1st OR DIVORCED (1st, 2d, 3d, etc.) 18 OCCUPATION
ALTERATI ION, ONE N OF MAI	Factory Worker 10 BIRTHPLACE Southborough (City or town) (State or country)	Housework 20 BIRTHPLACE Southborough (City or town) (State or country)
supplied. R VIOLAT be RETUR	11 NAME OF FATHER Eugene Baldelli 12 MAIDEN NAME OF MOTHER Fermina Serfillip!	21 NAME OF James Bertonazzi 22 MAIDEN NAME OF MOTHER Albina Berni
be carefully s PENALTY FOR	of Southborough according to law, (Name of city or town) Certificate issued (Month) (Day) (Year)	
ion should IDDEN: m the law 1859-f.	24 I HEREBY CERTIFY that I joined the above-named persons in (If marriage was	solemnized in a church, give its NAME instead of street and numbe

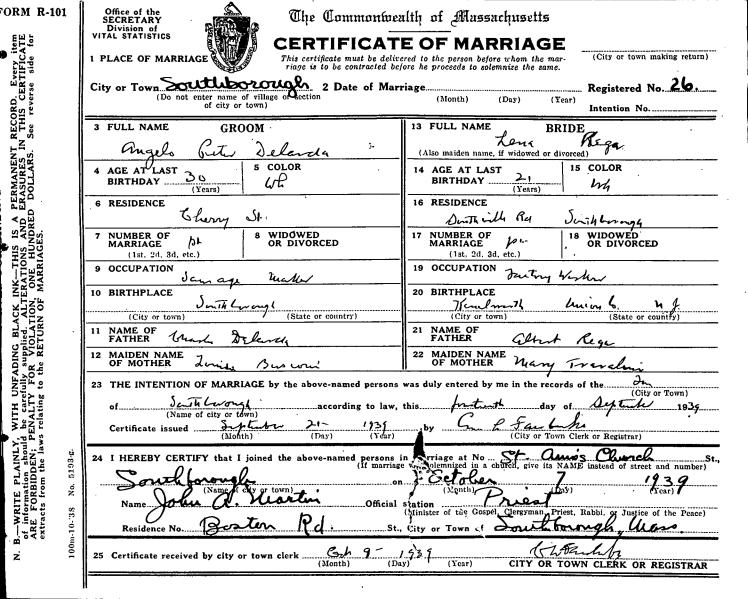


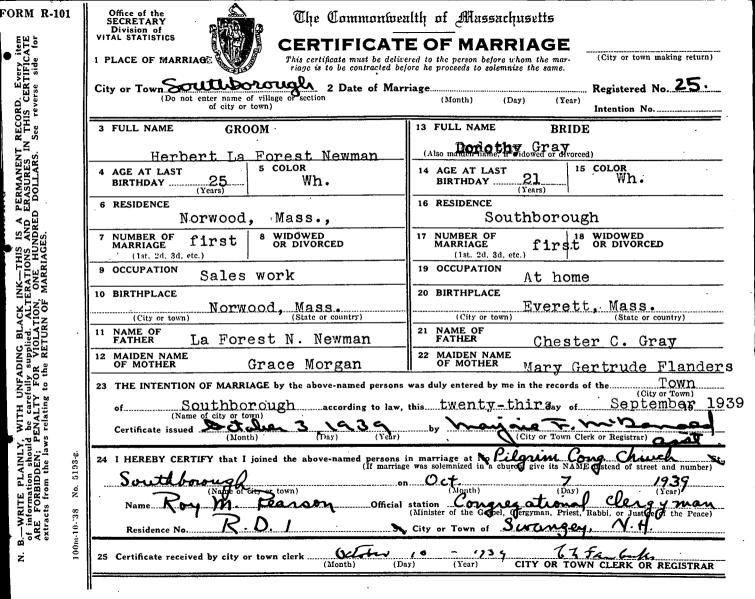


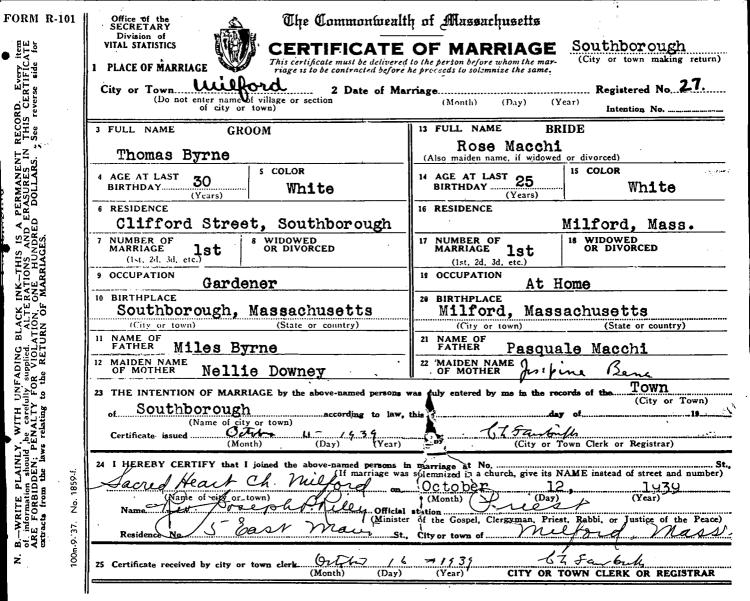
FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the mar-(City or town making return) 1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. borough 2 Date of Marriage..... Registered No. 24 (Do not enter name of village or Section (Month) (Dav) (Year) of city or town) Intention No. 13 FULL NAME 3 FULL NAME GROOM BRIDE Ida M. Dragomani Arnold Urbinati (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 4 AGE AT LAST 14 AGE AT LAST Wh. Wh. BIRTHDAY BIRTHDAY..... (Years) (Years) 6 RESIDENCE 16 RESIDENCE Conant Road. Framingham, Mass. Break Neck Hill Road, Southboro, 7 NUMBER OF 8 WIDOWED 17 NUMBER OF 18 WIDOWED first MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED first (1st. 2d. 3d, etc.) (1st. 2d. 3d. etc.) 19 OCCUPATION OCCUPATION Factory worker Meat Packer 10 BIRTHPLACE 20 BIRTHPLACE Italy Southborough (City or town) (State or country) (State or country) (City or town) 11 NAME OF NAME OF John Urbinati Avdazio Dragomani **FATHER** FATHER 12 MAIDEN NAME 22 MAIDEN NAME Justina Geonlorenzi OF MOTHER Mary Del Prete OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) Southboroughaccording to law this (Name of city or town) Certificate issued Grant (City or Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church, give its NAME instead of street and number) (Name of city or town) (Month Official station (Minister of the Gospel, Clergyman, Driest, Babbi, or Justice of the Peace) 37. Residence No...... ...St.. City or town of è 25 Certificate received by city or town clerk...... (Month) CITY OR TOWN CLERK OR REGISTRAR









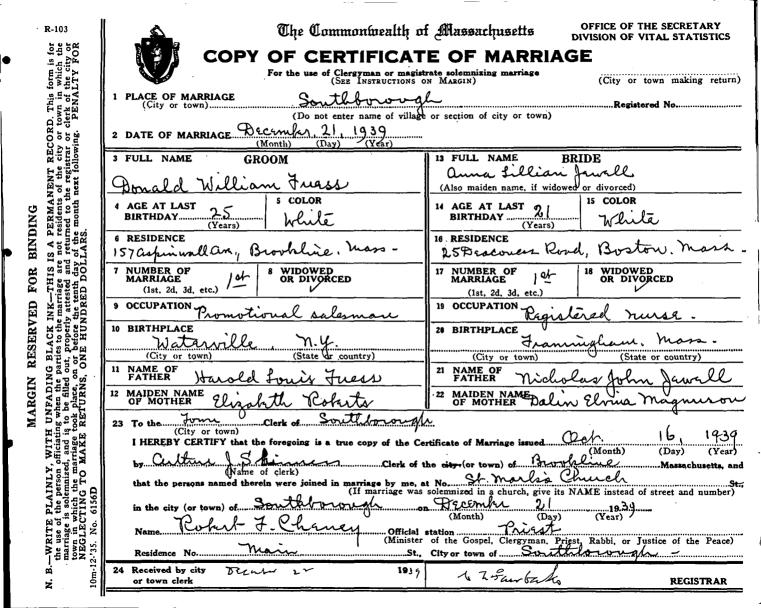


FORM R-101	Office of the SECRETARY Division of The Commonwealth o	f Mussachusetts
FICATE	VITAL STATISTICS 1 PLACE OF MARRIAGE CERTIFICATE O This certificate must be delivered to the riage is to be contracted before he pr	
RD. Eve CERTII reverse t	City or Town South Donate of Marriag (Do not enter name of village of section of city or town)	(Month) (Day) (Year) Intention No.
T RECO	Fields L. L. Challes La	FULL NAME BRIDE Wattle Philbirt Whate Also maiden name, if widowed or divorced)
KMANEN SURES OLLARS	L.S. COLOR	AGE AT LAST 25 BIRTHDAY (Years)
A PER ND ERAL RED D	6 RESIDENCE 16	RESIDENCE Saith Langly
THIS IS ONS AN HUNDI	MARRIAGE (1st. 2d. 3d. etc.) OR DIVORCED	NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) OCCUPATION
CK INK- TERATIONE OF MAI	Cent	BIRTHPLACE Must be was
VG BLAC	(City or town) (State or country) 11 NAME OF FATHER COUNTY Public 21	(City or town) (State or country) NAME OF FATHER CATTLE S. Welster
JNFADIN ly suppli FOR VI	12 MAIDEN NAME OF MOTHER CLASSES WAS A THE INTENTION OF MARRIAGE by the above-named persons was	MAIDEN NAME OF MOTHER LED ON WEITELLE WALLE
WITH to careful NALTY elating t	of	(City or Town)
AINLY, should be EN; PE be laws	(Month) (Day) (Year) 24 I HERERY CERTIFY that I joined the above-named persons in ma	City or Town Clerk or Registrar
IITE PLAI rmation sh ORBIDDE from the	Name of city or fown here of Official state	Oct. 14 1939 (Month) Print (Day) (Year)
N. B.—WR of, info ARE F extracts	Residence No. St., Cit	the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) by or town of
Z 00	25 Certificate received by city or town clerk (Month) (Day)	(Year) CITY OR TOWN CLERK OR REGISTRAR

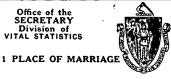
FORM R-101 Office of the The Commonwealth of Mussachusetts SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the mar-1 PLACE OF MARRIAGE rianc is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage MOU. 30 (Do not enter name of village or ection (Day) (Month) of city or town) 13 FULL NAME 3 FULL NAME GROOM · ELLILOIL 14 AGE AT LAST 57 5 COLOR 4 AGE AT LAST BIRTHDAY BIRTHDAY (Years) 16 RESIDENCE Southborough WIDOWED 17 NUMBER OF 7 NUMBER OF OR DIVORCED MARRIAGE MARRIAGE (1st. 2d. 3d. etc.) (1st, 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION 20 BIRTHPLACE 10 BIRTHPLACE (City or town) (City or town) (State or country). 11 NAME OF FATHER 22 MAIDEN 12 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the. ccording to law, this 30 (Day) (Year) 5193-g. 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No St. NAME instead of street and number) Š. (Month) (Name of city or town)Official station 00m-10-38 Residence No... 25 Certificate received by city or town clerk . Describer 29.

(City or town making return) Registered No. 30 (Year) Intention No. BRIDE Pathoni (Also maiden name widowed or divorced) 15 COLOR Stallord St., E. Boston, Mass. WIDOWED OR DIVORCED DANGERO APO PORMLOW (State or country) (City or Town Clerk or Registrar) (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

(Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR



Office of the SECRETARY Division of VITAL STATISTICS



The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

2 Date of Marriage

(City or town making return)

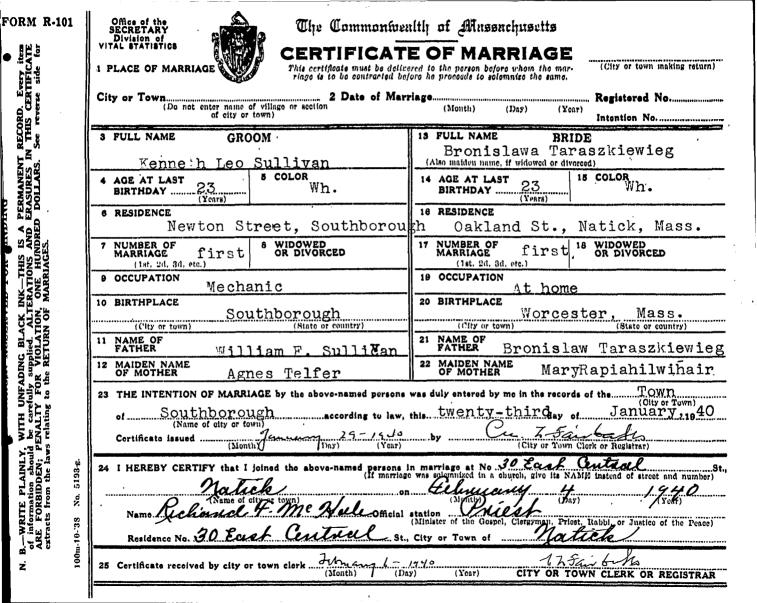
Registered No.....

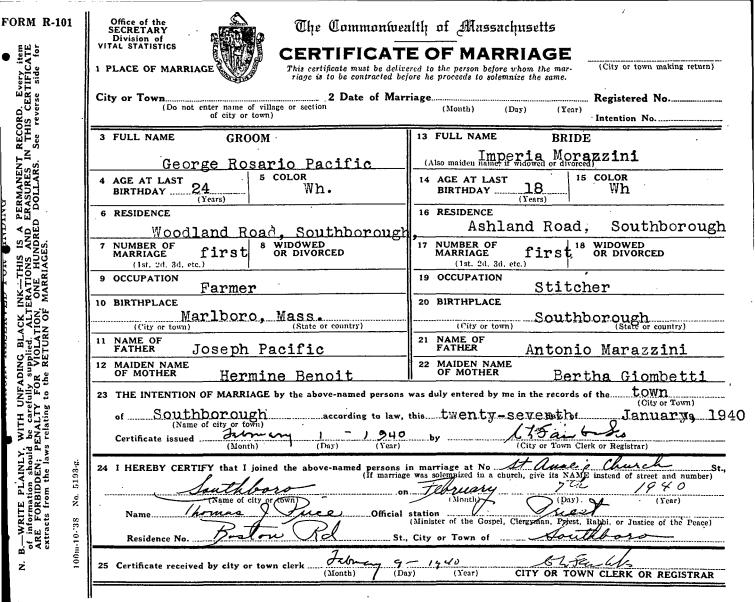
This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

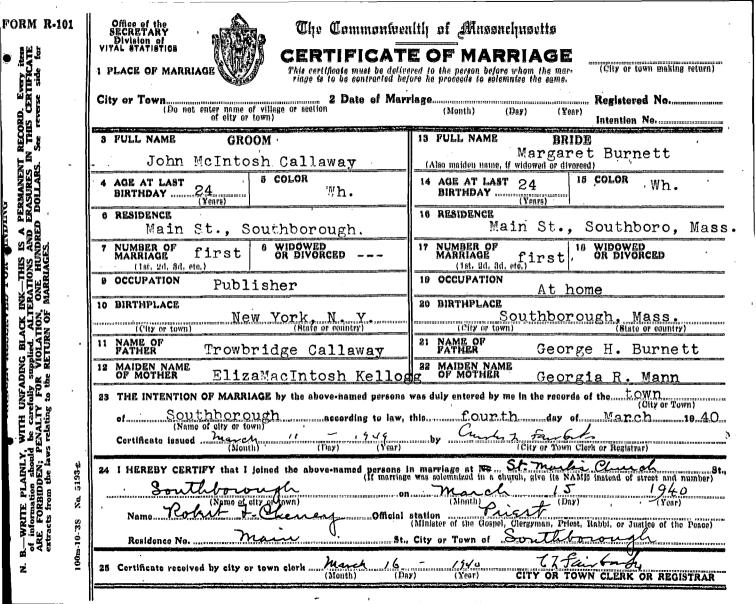
		(Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No
ŀ	3	FULL NAME GROOM	13 FULL NAME BRIDE
		James Burgess Fearon	Marguerite Macomber (Also maiden name, if widowed or divorced)
	4	AGE AT LAST 22 5 COLOR White	14 AGE AT LAST 8 White (Years)
	. 6	RESIDENCE	16 RESIDENCE
١		Southborough, Mass.	Framingham, Mass.
	7	NUMBER OF ARRIAGE 1st swidowed or Divorced single	17 NUMBER OF 18 WIDOWED OR DIVORCED 18 Singl
	9	OCCUPATION Lockheed Aircraft	19 OCCUPATION at home
	10	BIRTHPLACE	20 BIRTHPLACE
		Shanghai, China (City or town) (State or country)	Framingham, Mass. (City or town) (State or country)
	11	NAME OF FATHER Francis Low Fearon	21 NAME OF FATHER Charles Hunt Macomber
	,—	of Mother Elsa Burgess	22 MAIDEN NAME OF MOTHER Marguerite Swindell
23 THE INTENTION OF MARRIAGE by the above-named persons was d			was duly entered by me in the records of the TOWN
		of Southborough according to law,	this eighth day of December 19 39
		(Name of city or town) Certificate issued	hearding Timbersed
	_	(Month) (Day) (Year)	(City or Town Clerk or Registrar)
a-00	24	I HEREBY CERTIFY that I joined the above-named persons i	in marriage at No. At. Marka St., e was solemnized in a church, give its NAME instead of street and number)
0. 91		Southborough	December 28 1939
ž	·	Name Seoge S. Serler Official	station (Day) (Year)
-10-38		Residence No. St. Markis School.	station (Minister of the Gospel, Cyrgy an, Priest, Rabbi, or Justice of the Peace) City or Town of
1001	25	Certificate received by city or town clerk (Month) (Da	y) (Xear) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the The Commonwealth of Massachusetts Division of CERTIFICATE OF MARRIAGE (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to selemnize the same. (Do not enter name of village or section (Month) of city or town) Intention No..... 13 FULL NAME 3 FULL NAME GROOM BRIDE Many Phinesa (Also maiden name, if widowed or divorced) 4 AGE AT LAST 14 AGE AT LAST 3 15 COLOR BIRTHDAY (Years) 16 RESIDENCE 6 RESIDENCE Con cord any Cambridge Smith ill Road. 367 8 WIDOWED OR DIVORCED 7 NUMBER OF 17 NUMBER OF 18 WIDOWED MARRIAGE OR DIVORCED MARRIAGE (1st. 2d. 8d. etc.) (1st. 2d. 3d. etc.) 19 OCCUPATION 9 OCCUPATION Excutin 20 BIRTHPLACE 10 BIRTHPLACE (City or town) (City or town) (State or country) 21 NAME OF 11 NAME OF FATHER FATHER 12 MAIDEN NAME OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the South bring (Name of city or town) Certificate issued (Month) (Day) 5193-g nghamst., City or Town of 25 Certificate received by city or town clerk (Fonth) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage Registered No. (Do not enter name of village or section of city or town) Intention No. 13 FULL NAME 3 FULL NAME BRIDE (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 4 AGE AT LAST 14 AGE AT LAST BIRTHDAY BIRTHDAY 6 RESIDENCE 16 RESIDENCE Scrith Con ough Markin 8 WIDOWED OR DIVORCED 17 NUMBER OF 18 WIDOWED 7 NUMBER OF MARRIAGE MARRIAGE OR DIVORCED (1st. 2d. 3d. etc.) (1st. 2d. 3d. etc.) 19 OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (State or country) (City or town) 11 NAME OF FATHER 21 NAME OF FATHER 22 MAIDEN NAME 12 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the............ (Name of city or town) (Name of city or town) Certificate issued (Name of City of Court (City or Town Clerk or Registrar) (City or Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No Immodulate Countries Clause (If marriage was solemnized in a church, give its NAME instead of street and number) 51.93-6. (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) 00m-10-38 into Court St., City or Town of Marchonough 25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR







FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the mar-(City or town making return) 1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. _ 2 Date of Marriage..... Registered No. (Do not enter name of village or section (Month) of city or town) Intention No..... 13 FULL NAME 3 FULL NAME GROOM . BRIDE Gladys Mary Dunn. Edward B. Waite, Jr. (Also maiden name, if widowed or divorced) 4 AGE AT LAST 14 AGE AT LAST 19 5 COLOR 15 COLOR Wh. BIRTHDAY (Years) 16 RESIDENCE 6 RESIDENCE Belmont St.. Westborough. Main Street, Southborough, 8 WIDOWED 17 NUMBER OF first OR DIVORCED 7 NUMBER OF OR DIVORCED MARRIAGE MARRIAGE (1st. 2d. 3d. etc.) (1st, 2d, 3d, etc.) ATION: 9 OCCUPATION 19 OCCUPATION Office worker Railway Mail Service 20 BIRTHPLACE 10 BIRTHPLACE Marlboro, Mass. Willbury. Mass. (City or town) (State or country) 21 NAME OF 11 NAME OF Vincent B. Dunn Edward B. Waite FATHER FATHER 22 MAIDEN NAME 12 MAIDEN NAME OF MOTHER Cora Harvey OF MOTHER Gladvs Morse town 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the...... (City or Town) of Southbrough according to law, this fifth day of March (Name of city or town) Certificate issued (City or Town Clerk or Registrar) (Day) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Access Roctory S (If marriage was solemnized in a church, give its NAME instead of street and number) / (Name of city or town) Jelsed R. Brophy Official station station
(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) St., City or Town of Southlows march 26-1940 25 Certificate received by city or town clerk (Year) CITY OR TOWN CLERK OR REGISTRAR (Month)

FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. ___ 2 Date of Marriage..... City or Town Registered No. (Do not enter name of village or section (Month) of city or town) Intention No. 13 FULL NAME 3 FULL NAME BRIDE GROOM (Also maiden name, if widowed or divorced) 15 COLOR 14 AGE AT LAST 4 AGE AT LAST BIRTHDAY BIRTHDAY (Years) (Years) 16 RESIDENCE 6 RESIDENCE WIDOWED 17 NUMBER OF 7 NUMBER OF WIDOWED OR DIVORCED MARRIAGE MARRIAGE OR DIVORCED (1st, 2d, 3d, etc.) (1st. 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION 20 BIRTHPLACE 10 BIRTHPLACE (City or town) (State or country) (City or town) (State er country) 21 NAME OF 11 NAME OF FATHER **FATHER** 22 MAIDEN NAME 12 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (Name of city or town) Certificate issued (City or Town Clerk or Registrar) (Month) 5193-g. (Name of city or town) Official station
(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) 00m-10-38 St., City or Town of S. T. T. Residence No. CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS FICATE OF MARRIAGE This certificate must be delivered to the person before whom the mar-(City or town making return) 1 PLACE OF MARRIAGE riage is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage..... Registered No..... (Do not enter name of village or section (Month) of city or town) Intention No..... 13 FULL NAME 3 FULL NAME BRIDE GROOM 8000 (Also maiden name, if widowed or divorced) 15 COLOR 14 AGE AT LAST 4 AGE AT LAST BIRTHDAY . BIRTHDAY (Years) (Years) 6 RESIDENCE 16 RESIDENCE WIDOWED 17 NUMBER OF 7 NUMBER OF 18 WILOWED OR DIVORCED MARRIAGE MARRIAGE (1st. 2d. 3d. etc.) (1st, 2d, 3d, etc.) 9 OCCUPATION 19 OCCUPATION 20 BIRTHPLACE 10 BIRTHPLACE (State or country) (City or town) (State or country) 21 NAME OF 11 NAME OF FATHER 9 FATHER 22 MAIDEN NAME 12 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the....... (City or Town) according to law, this...... (Name of city or fown) City or Town Clerk or Registrar) 5193-6. (Name of city or town) Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) OU St., City or Town of January 1940 (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

The Commonwealth of Massachusetts

OFFICE OF THE SECRETARY DIVISION OF VITAL STATISTICS



COPY OF CERTIFICATE OF MARRIAGE

For the use of Clergyman or mag (SEE INSTRUCTIONS	
1 PLACE OF MARRIAGE Southborough	~Registered No
	ge or section of city or town)
3 FULL NAME GROOM	13 FULL NAME BRIDE
Frederick L. Sherman	Also maiden name, if widowed or divorced)
4 AGE AT LAST 2.2 S COLOR W	14 AGE AT LAST 2 2 IS COLOR W
6 RESIDENCE 33 Central St.	16 RESIDENCE 33 General Cold St.
marlborough, mass.	
7 NUMBER OF 6 WIDOWED OR DIVORCED (1st, 2d, 3d, etc.)	17 NUMBER OF MARRIAGE Gust 18 WIDOWED OR DIVORCED
9 OCCUPATION laundry mgr.	19 OCCUPATION school teacher
10 BIRTHPLACE malborough, mass.	20 BIRTHPLACE Jacouton, mass-
(City or town) (State or country) 11 NAME OF FATHER Frederich S. Sherman	(City or town) (State or country) 21 NAME OF FATHER Charles Field
12 MAIDEN NAME OF MOTHER Track H. Lougley	22 MAIDEN NAME Clizaleth Bran
23 To the (City or town)	u
I HEREBY CERTIFY that the foregoing is a true copy of the	
by trancis Bertraul Clerk of	the city (or town) of
that the persons named therein were joined in marriage by me.	at No. St. Marks Church S as solemnized in a church, give its NAME instead of street and number)
in the city (or town) of Sportful Transport	
Name Robert 7. Cherry Officia (Ministr	
NameOfficia (Ministe	er of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

NEGLECTI

24 Received by city

or town clerk

Muy 1 1946 C3 four bats REGISTRAR

1	
Division of Residential	realth of Massachusetts
MATERIAL CTATIOTION MATERIAL VICTORIAL	TE OF MARRIAGE
1 PLACE OF MARRIAGE This certificate must be de	livered to the person before whom the mar- before he proceeds to solemnize the same.
City or Town	arriage Registered No
(Do not enter name of village or section of city or town)	(Month) (Day) (Year) Intention No
3 FULL NAME GROOM	13 FULL NAME BRIDE
Pare Ostruck	(Also maid name, if widowed or divorced)
4 AGE AT LAST 5 COLOR BIRTHDAY (Years)	14 AGE AT LAST 15 COLOR BIRTHDAY (Years)
6 RESIDENCE Cucher, ny	16 RESIDENCE South borough
7 NUMBER OF NARRIAGE OR DIVORCED 2	17 NUMBER OF 18 WIDOWED OR DIVORCED
9 OCCUPATION Much	19 OCCUPATION Sha Greating
10 BIRTHPLACE ST Pank Minn	20 BIRTHPLACE Jonth Gerangh
(('ity or town) (State or country)	(City or town) (State or country)
11 NAME OF Author Oshruh	21 NAME OF Louis Rentmaggi
12 MAIDEN NAME OF MOTHER Gummb to Gerney	22 MAIDEN NAME Toning Co to 2.11
23 THE INTENTION OF MARRIAGE by the above-named person	ns was duly entered by me in the records of the
s of South Livery according to law	
Certificate issued (Month) (Day) (Vear	City or Town Clerk or Registrar)
24 I HEREBY CERTIFY that I joined the above-named person	s in marriage at No A anne o Gectory S
24 I HEREBY CERTIFY that I joined the above-named person (If marr	iage was solemaized in a church, give its NAME instead of street and number)
(Name of city or town)	(Month) (Day) (Year)
Name /homas / Juce Officia	(Minister of the Gospel, Clergyman, Friest, Raphi, or Justice of the Peace)
Residence No. Batton Rd	St., City or Town of Southboro
II 25 Certificate received by city or town cierk	Day) (Year) CITY OR TOWN CLERK OR REGISTRAR
	Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage Registered No. (Do not enter name of village or section (Month) of city or town) Intention No. 13 FULL NAME BRIDE 3 FULL NAME GROOM . Grace Edna Corbett Ernest Standish (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 14 AGE AT LAST 4 AGE AT LAST .Wh. BIRTHDAY BIRTHDAY (Years) 16 RESIDENCE 6 RESIDENCE Stowe St. Southborough Mechanic St. Mass 8 WIDOWED 17 NUMBER OF WIDOWED 7 NUMBER OF OR DIVORCED MARRIAGE OR DIVORCED lst. MARRIAGE lst. (1st. 2d. 3d. etc.) (1st, 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION ⁿookkeeper At home 20 BIRTHPLACE 10 BIRTHPLACE Southborough (State of country) (City or town) 21 NAME OF 11 NAME OF Ernest J. Standish FATHER Charles E. Corbett **FATHER** 22 MAIDEN NAME 12 MAIDEN NAME OF MOTHER OF MOTHER Jessie M. Atkinson Marion A. Barnes 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the City or Town) of Southborough according to law, this piretaenth day of June 1940 (Name of city or town) Certificate issued (Month) (City or Town Clerk or Registrar) (Day) 5193-6. Mmund Official station ... (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) 00m-10-38 St., City or Town of March 25 Certificate received by city or town clerk (Minth) CITY OR TOWN CLERK OR REGISTRAR (Year) - 東京の大学の大学のです。

FORM R-101 Figure 101 Figure	VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be delix	EOF MARRIAGE ered to the person before whom the mar- erore he proceeds to solemnize the same. (City or town making return)
ND. Every IS CERTIFI reverse sid	City or Town	riage Registered No. (Year) Intention No.
MANENT RECC SURES IN THI FLLARS. See	3 FULL NAME GROOM CELT Curving and a second	13 FULL NAME BRIDE (Also maiden name, if widowed or divorce) 14 AGE AT LAST BIRTHDAY 15 COLOR
IS A PERI AND ERAS NDRED DO	7 NUMBER OF MARRIAGE OR DIVORCED	16 RESIDENCE 17 NUMBER OF MARRIAGE OR DIVORCED
ED FOR INK—THIS ERATIONS ONE HU	9 OCCUPATION 10 BIRTHPLACE	(1st. 2d, 3d, etc.) 19 OCCUPATION 20 BIRTHPLACE
KESEKV IG BLACK pplied, ALT VIOLATION RETURN OF	((Co or ow)) (State or country) 11 NAME OF FATHER 12 MAIDEN NAME.	(City or town) (State or country) 21 NAME OF FATHER Our daystawicy 22 MAIDEN NAME
MAKGIN TH UNFADIR carefully su ALTY FOR lating to the l	23 THE INTENTION OF MARRIAGE by the above-named persons of (Name of city or town)	was duly entered by me in the records of the (City or Town)
LAINLY, WI on should be DDEN; PEN of the laws rel	Certificate issued (Month) (Day) (Year) 24 I HEREBY CERTIFY that I joined the above-named persons (If marriage)	in marriage at No St. Asset St. St. St. St. St. St. St. St. St. St
-WRITE P f information RE FORBI ktracts fron 10.38 No.		station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) , City or Town of
N. B	25 Certificate received by city or town clerk (Month) (D.	1940 She I Fairly

Office of the SECRETARY Division of ITAL STATISTICS	RIAGE
_	(A)

The Commonwealth of Mussachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

(City or town making return)

City or Town 2 Date of M (Do not enter name of village or section of city or town)	farriage Registered No. (Month) (Day) (Year)
or city of towny	Intention No.
3 FULL NAME GROOM	13 FULL NAME BRIDE Dorothy Mae Stewart
Harvey E. Dear	(Also maiden name, if widowed or divorced)
4 AGE AT LAST 5 COLOR With h	14 AGE AT LAST 20 IS COLOR White
6 RESIDENCE Lincolnville, Maine	16 RESIDENCE Southborough Central Street,
7 NUMBER OF first 8 WIDOWED OR DIVORCED (1st, 2d, 3d, etc.)	17 NUMBER OF SIRST 18 WIDOWED OR DIVORCED (1st. 2d. 3d. etc.)
9 OCCUPATION Farmer	19 OCCUPATION Waitress
Camden, Maine (City or town) (State or country)	20 BIRTHPLACE Springfield, Mass. (City or town) (State or country)
11 NAME OF Elmer H. Dean	21 NAME OF Alfred A. Stewart
of Mother Vivian W. Moody	22 MAIDEN NAME Flsie M. Kroewel
23 THE INTENTION OF MARRIAGE by the above-named perso ofSouthboroughaccording to la	(City or Town)
(Name of city or town)	(City or Town Clerk or Registrar)
	rings was serimmed in a states, the its lixing masted of street and number
Name Office Name Office	(Month) (Dy) (Yeal)
Residence No. Certal	St., City or Town of Jayarlle
25 Certificate received by city or town clerk(Month)	(Day) (Year) CITY OR TOWN CLERK OR REGISTRA

FORM R-101 Office of the SECRETARY The Commonwealth of Massachusetts Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. City or Town 2 Date of Marriage..... Registered No..... (Do not enter name of village or section (Month) (Day) (Year) of city or town). Intention No. 13 FULL NAME 3 FULL NAME GROOM BRIDE 7 D 12 (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 14 AGE AT LAST AGE AT LAST BIRTHDAY Y BIRTHDAY (Years) (Years) 16 RESIDENCE 6 RESIDENCE 17 NUMBER OF 7 NUMBER OF WIDOWED WIDOWED OR DIVORCED OR DIVORCED MARRIAGE MARRIAGE (1st, 2d, 3d, etc.) (1st. 2d. 3d. etc. 19 OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (State or country) (City or town) (City or town) (State or country) 21 NAME OF 11 NAME OF FATHER MAIDEN NAME 12 MAIDEN NAME OF MOTHER OF MOTHER THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the..... (City or Town) ____according to law, this_..... (Name of city or town) Certificate issued (City or Town Clerk or Registra) (Month) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No ... (If marriage was solemnized in a church, give its NAME instead of street and number ergyman, Priest, Rabbi, or Justice of the Peace) ... St., City or Town of 25 Certificate received by city or town clerk CITY OR TOWN CLERK OR REGISTRAR (Year)

FORM R-101	Division of VITAL STATISTICS	th of Massachusetts
Erry item	1 PLACE OF MARRIAGE This certificate must be deliver	ed to the person before whom the marre he proceeds to solemnize the same. (City or town making return)
CORD. Ever THIS CERTIF e reverse si	City or Town	(Month) (Day) (Year) Intention No.
NENT RECC ES IN THI ARS. See	3 FULL NAME GROOM Cutture F. Sittle field 4 AGE AT LAST 5 COLOR	13 FULL NAME BRIDE (Also maiden name, widowed or divorced) 14 AGE AT LAST 15 COLOR
BENDÎNG 1S A PERMA AND ERASUR NDRED DOLL ES.	6 RESIDENCE 8 2 Clu 21 - 2 of mills, man	BIRTHDAY (Years) weite 16 RESIDENCE South Long
FOR ECTHIS IS ATTOMS AND INC. HUNDINA RELIABES.	7 NUMBER OF MARRIAGE (1st. 2d. 3d. etc.) 21 8 WIDOWED OR DIVORCED 9 OCCUPATION	17 NUMBER OF MARRIAGE (1st. 2d, 3d, etc.) 18 WIDOWED OR DIVORCED 19 OCCUPATION
SSERVED BLACK INK Id. LATION, O. URN OF M.	(City or town) (State or country) 11 NAME OF	20 BIRTHPLACE (City or town) State or country) 21 NAME OF
GIN KE ADING B y supplied OR VIOL the RETU	12 MAIDEN NAME OF MOTHER COME Spancer	22 MAIDEN NAME OF MOTHER Ougolina Perfault
Y, WITH UNF	of (Name of city or town) Certificate issued (Month) (Day) (Year)	(City or Town)
RITE PLAINLY ormation shou FORBIDDEN; its from the lav. 8 No. 5193-g.	Southboro	was solemnized in a church, give its NAME instead of street and number)
N. B.—WRI of infor ARE FC extracts 100m-10-38	Residence No. Beston Rd St., 25 Certificate received by city or town clerk (Month) (Day	4-1940 13 Fair 6als

FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. City or Town 2 Date of Marriage Registered No. (Do not enter name of village or section of city or town) Intention No. 13 FULL NAME 3 FULL NAME GROOM · BRIDE Ethel Margarette Cox (Also maiden name, if widowed or divorced) Gerald Egmund Boyd Hardin 5 COLOR 15 COLOR 14 AGE AT LAST 4 AGE AT LAST white white BIRTHDAY BIRTHDAY 16 RESIDENCE 6 RESIDENCE Southborough. Mass. Foxboro. Mass. 17 NUMBER OF 7 NUMBER OF 8 WIDOWED 18 WIDOWED OR DIVORCED MARRIAGE MARRIAGE OR DIVORCED single (1st. 2d. 3d. etc.) single (1st, 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION Waitteess Machinist 20 BIRTHPLACE 10 BIRTHPLACE Ashland, Mass. (State or country) Cambridge, Nova Scotia
(City or town) (State or country) 11 NAME OF 21 NAME OF FATHER **FATHER** GeorgeHardin Andrew Borden Cox 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER Mary Gray MacDermid Mahel Jordan 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the TOWN (City or Town) of Southborough according to law, this 13th day of Angust 1940 Certificate issued August 19 1940 by (City or Town Clerk or Registrar) Official station (Minister of the Gospel, Mergyman, Priest, Dabbi, or Justice of the Peace) 00m-10-38 St., City or Town of Residence No. 26-1940 25 Certificate received by city or town clerk CITY OR TOWN CLERK OR REGISTRAR

RD. Every item S. CERTIFICATE reverse side for 101-1	Office of the SECRETARY Division of VITAL STATISTICS The Commonwealth of Massachusetts CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. (City or town making return)
ECORD. EV THIS CERT Re reverse	City or Town 2 Date of Marriage Registered No. (Month) (Day) (Year) Intention No. (Structure of city or town).
LING PERMANENT RE ERASURES IN 1 DOLLARS. Se	4 AGE AT LAST SCOLOR BIRTHDAY (Years) 5 COLOR BIRTHDAY (Years) 15 COLOR BIRTHDAY (Years) 16 RESIDENCE 16 RESIDENCE
ED FOR BEND INK—THIS IS A ERATIONS AND ONE HUNDREI MARRIAGES.	7 NUMBER OF MARRIAGE (1st. 2d, 3d, etc.) 8 WIDOWED OR DIVORCED (1st. 2d, 3d, etc.) 10 BIRTHPLACE 11 NUMBER OF MARRIAGE (1st. 2d, 3d, etc.) 12 OCCUPATION 13 OCCUPATION 14 OCCUPATION 15 DIRTHPLACE 20 BIRTHPLACE
TIN KESEKVI ADING BLACK I Supplied ALTI R VIOLATION, he RETURN OF	(City or town) (State or country) (City or town) (State or country) 11 NAME OF FATHER 12 MAIDEN NAME OF MOTHER COUNTRY 12 MAIDEN NAME OF MOTHER COUNTRY 13 MAIDEN NAME OF MOTHER COUNTRY 14 MAIDEN NAME OF MOTHER COUNTRY 15 MAIDEN NAME OF MOTHER COUNTRY 16 MAIDEN NAME OF MOTHER COUNTRY 17 MAIDEN NAME OF MOTHER COUNTRY 18 MAIDEN NAME OF MOTHER COUNTRY 19 MAIDEN NAME OF MOTHER COUNTRY 10 MAIDEN NAME OF MOTHER COUNTRY 11 MAIDEN NAME OF MOTHER COUNTRY 12 MAIDEN NAME OF MOTHER COUNTRY 13 MAIDEN NAME OF MOTHER COUNTRY 14 MAIDEN NAME OF MOTHER COUNTRY 15 MAIDEN NAME OF MOTHER COUNTRY 16 MAIDEN NAME OF MOTHER COUNTRY 17 MAIDEN NAME OF MOTHER COUNTRY 18 MAIDEN NAME OF MOTHER COUNTRY 18 MAIDEN NAME OF MOTHER COUNTRY 19 MAIDEN NAME OF MOTHER COUNTRY 10 MAIDEN NAME OF MO
LY, WITH UNE LY, WITH UNE sould be carefully pould be carefully follows relating to the case of the ca	23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) of (Name of city or town) Certificate issued (Month) (Day) (Year) by (City or Town Clerk or Registrar)
ITE PLAIN rmation sha ORBIDDEN s from the l	24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 2 Standard In a church, give its NAME instead of street and number) (If marriage was solemnized in a church, give its NAME instead of street and number) (Name of city or tamp) (Name of city or tamp) (Name of city or tamp) (Minister of the Gospel, Organyman, Priest, Babbi, or Justice of the feace)
N. B.—WR of info ARE F extract	Residence No. 20 Cut St., City or Town of Cut St., City or Town of Cut St., City or Town of Ci

ORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage..... City or Town Registered No..... (Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No..... 13 FULL NAME 3 FULL NAME GROOM BRIDE (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 14 AGE AT LAST 4 AGE AT LAST BIRTHDAY BIRTHDAY (Years) (Years) 6 RESIDENCE 16 RESIDENCE NUMBER OF WIDOWED 17 NUMBER OF WIDOWED OR DIVORCED MARRIAGE MARRIAGE OR DIVORCED (1st, 2d, 3d, etc.) (1st. 2d. 3d. etc. 19 OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (State or country) (City or town) (City or town (State or country) 11 NAME OF 21 NAME OF FATHER FATHER MAIDEN NAME 12 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of theaccording to law, this..... (Name of city or town) scrtu ity or Town Clerk or Registrar) (Day) 5193-g. 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No ... 5.T. (If marriage was solemnized in a church, give its NAME instead of street and number) No. (Name of city or town) (Year) Official station 00m-10-38 (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)St., City or Town of Southern Residence No..... 25 Certificate received by city or town clerk ... CITY OR TOWN CLERK OR REGISTRAR (Day) (Year)

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FORM R-101 IFICATE side for	Division of VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be delive	E OF MARRIAGE red to the person before whom the mar- fore he proceeds to solemnize the same. (City or town making return)
CORD. Every ite THIS CERTIFICAT re reverse side f	City or Town	riage Registered No
NT RECO	3 FULL NAME GROOM Trederick J. Sanchioni	13 FULL NAME BRIDE Alice Irene Ramstrom (Also maiden name, if widowed or divorced)
G IRMANE POLLAR	4 AGE AT LAST 5 COLOR White	14 AGE AT LAST 31 IS COLOR. White
S A PE	6 RESIDENCE Valade Court, Southborough 7 NUMBER OF 8 WIDOWED	31 Church Street, Framingham, Mass.
FOR B THIS I	MARRIAGE first OR DIVORCED (1st. 2d. 3d. etc.)	17 NUMBER OF first 18 WIDOWED OR DIVORCED (1st. 2d, 3d, etc.) 19 OCCUPATION Factory Worker
KVED IX INK- ALTERA' ON, ON OF MAI	Ice Dealer 10 BIRTHPLACE C(City or town) Southborough (State or country)	20 BIRTHPLACE Framingham, Mass.
KESE 4G BLA 70164. 7101.ATI RETURN	11 NAME OF FATHER Joseph Sanchioni	21 NAME OF Carl Ramstrom 22 MAIDEN NAME
TRGIN INFADIN FOR to the I	23 THE INTENTION OF MARRIAGE by the above-named persons	was duly entered by me in the records of the
Y, WITH Lild be carell PENALITY	of Suit Corough according to law, (Name of city or town) Certificate issued (Month) (Day) (Year)	this scrutierth day of August 19the by Cha, I Fair La Le (City or Town Clerk or Registrar)
ITE PLAINE. Trnation show. ToRBIDDEN; s from the la No. 5193-g.	24 I HEREBY CERTIFY that I joined the above-named persons i (If marriage Transinglam on Name Want S. Duy Official	September 7th 1940 (Shough) 1 (Day) (Year)
N. B.—WEIJ of inford ARE FC extracts	Residence No. At: Bridgeto Pectory St.,	(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) City or Town of Transaction
X	25 Certificate received by city or town clerk Jey (month) (Da	y) (Year) CITY OR TOWN CLERK OR REGISTRAR
	II .	

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ORM R-101	Office of the SECRETARY Division of VITAL STATISTICS Office of the SECRETARY The Commonwealth of Massachusetts CERTIFICATE OF MARRIAGE
ery ite IFICAT side f	1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. (City or town making return)
ORD. Ev IIS CERT reverse	City or Town 2 Date of Marriage Registered No. (Month) (Day) (Year) Intention No.
LAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORN in should be carefully supplied. ALTERATIONS AND ERASURES IN THIS DDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See relating to the RETURN OF MARRIAGES.	3 FULL NAME GROOM AGE AT LAST
B.—WRITE PLAI of information s ARE FORBIDDE extracts from th	Name of city or toyn) Name Official station (Minister of the Gospel, Clerganian, Priest, Rabbi, or Justice of the Peace) Residence No. Bostow St., City or Town of
ż ⁶⁰	25 Certificate received by city or town clerk (Morth) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101	Division of VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be deliv	E OF MARRIAGE ered to the person before whom the mar- (City or town making return)
ORD. Ever IIS CERTIF reverse si		riage
ENT REC	Thomas F John: tim	(Also maiden name, if widowed or divorced)
VG ERMANI DOLLA	4 AGE AT LAST BIRTHDAY (Years) 6 RESIDENCE	14 AGE AT LAST 2 4 15 COLOR While 16 RESIDENCE
NDIN NDIN ND E	Sound St. South Garang 4	13 homets St. markowy
HIS IS HUND AND INGES.	7 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED	17 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED
K—T KATIO	9 OCCUPATION Fine Huper	19 OCCUPATION at home
KVE CK IN ALTEI OF A	10 BIRTHPLACE Dufur Onju	20 BIRTHPLACE Gostin (City or town) (State or country)
CESE BLAC ied. /	(City or town) (State or country) 11 NAME OF FATHER State S	(City or town) (State or country) 21 NAME OF FATHER
Supples Are RE	12 MAIDEN NAME Mand & Peakey	22 MAIDEN NAME Joshhim A La Za Lang
AKG UNFA efully r FO r to t	23 THE INTENTION OF MARRIAGE by the above-named persons	was duly entered by me in the records of the. (City or Town)
ITH E car IALT slating	ofaccording to law,	this 112 day of 5 ht. 1940
Y, W	Certificate issued (Month) (Day) (Year)	(City or Town Clerk or Registrar)
PLAINL show and the lame the l	24 I HEREBY CERTIFY that I joined the above-named persons (If marriag	in marriage at No Standard Could Charlest (experimental to the was solemnized in a church, give its NAME instead of street and number)
RITE F formati FORBI cts fror	Name John J. William Official	station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
i. B.—WRI of info ARE F extracts	Residence No. 17 Washington Court St.	, City or Town of marlborryh
ž .	25 Certificate received by city or town clerk (Mosth) (De	yo 7270 Laly (Year) CITY OR TOWN CLERK OR REGISTRAR

Office of the SECRETARY Division of VITAL STATISTICS



The Commonwealth of Mussachusetts

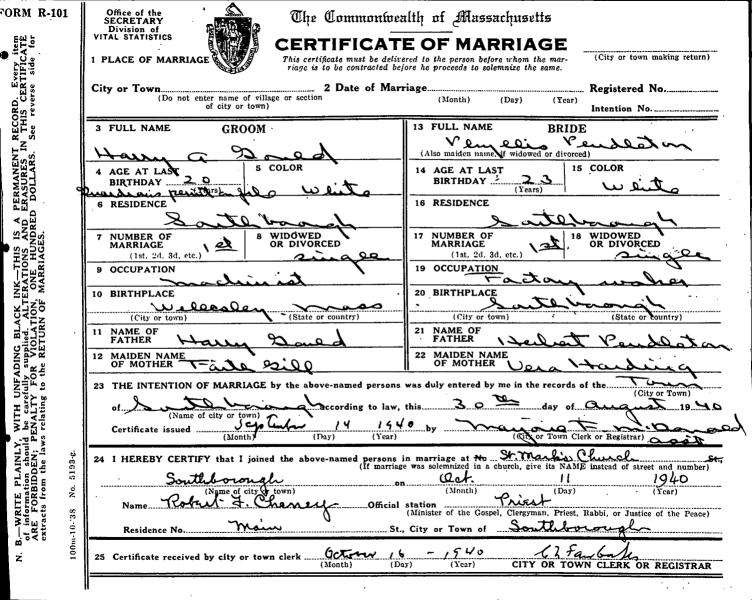
CERTIFICATE OF MARRIAGE

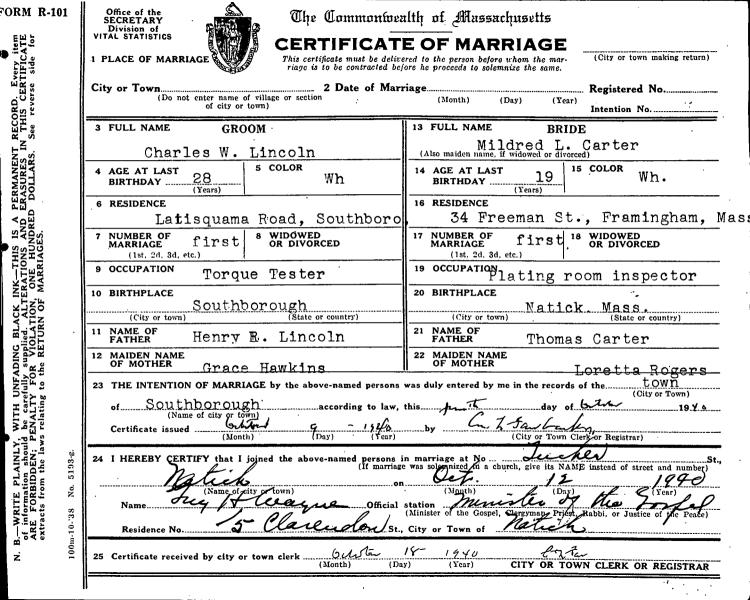
This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

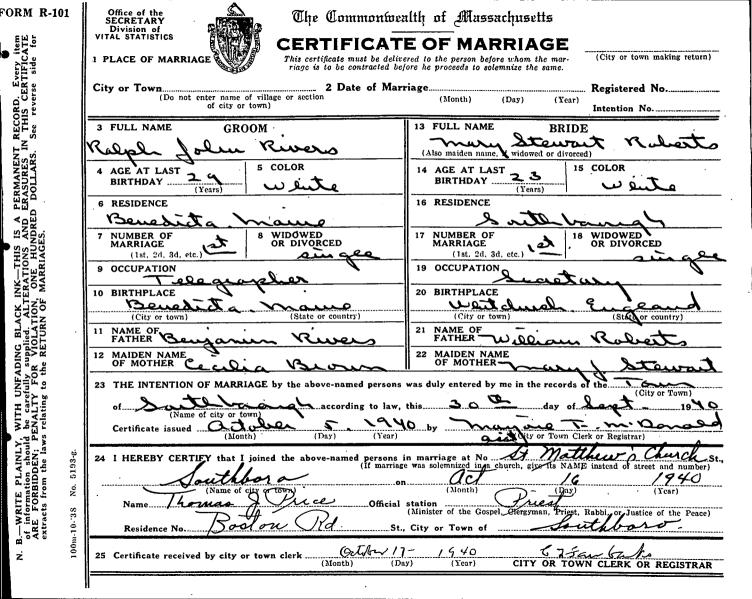
(City or town making return)

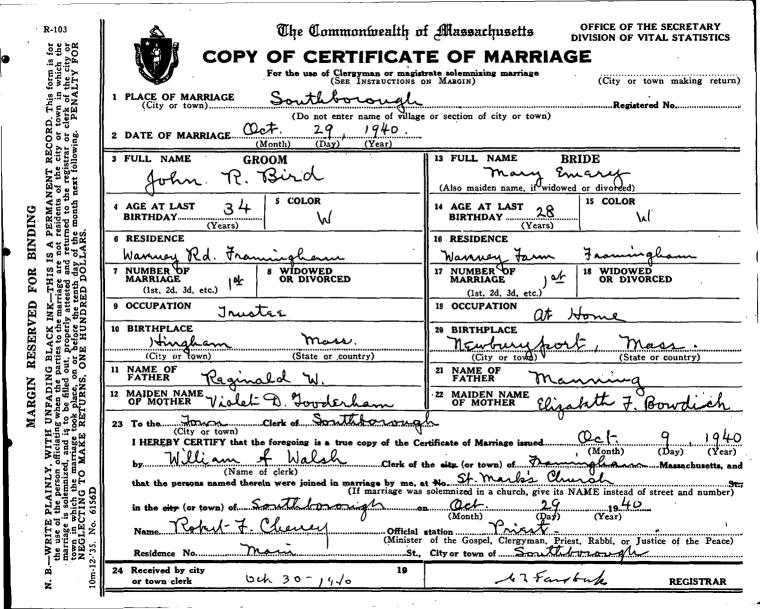
		11		ntention No.
3 FULL NAME Frank	enry Allen	(Also maiden n	ME BRIDE Luna Ru74 Cu name, if widowed or divorced)	admick
4 AGE AT LAST	5 COLOR	14 AGE AT BIRTHDA	LAST /8 15 C	olor WL
6 RESIDENCE	oling hass	16 RESIDEN	south boron	94
7 NUMBER OF MARRIAGE (1st, 2d, 3d, et	8 WIDOWED OR DIVORCED	1	OF 431- 18 W	VIDOWED OR DIVORCED
9 OCCUPATION	Farmer	19 OCCUPAT	Factory was	ku
10 BIRTHPLACE (City or town)	Holden nas	20 BIRTHPL		(State or country)
	Halsey allen			
12 MAIDEN NAME OF MOTHER	mable mus	22 MAIDEN OF MOTH	NAME Cum, time	Hilliand
of Scull (Nam Certificate issued	OF MARRIAGE by the above-note of city of fown) (Month) (Day)	rding to law, this how ty	Jehh day of Se City or Town Clerk	(City or Town) 19 or Registrar)
24 I HEREBY CER	ΓΙΓΥ that I joined the above-na	med persons in marriage at M (If marriage was solemnized in	Congregation to church, give its NAME in	nal Church sustend of street and number)
Name Enu	150 Institution Ave	Official station (Minister of the C	(Day) Clergyman, Priest, Rai Newton Unite	(Year)

FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the mar-(City or town making return) riage is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage..... City or Town Registered No..... (Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No. 13 FULL NAME 3 FULL NAME GROOM · BRIDE (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 4 AGE AT LAST 14 AGE AT LAST BIRTHDAY BIRTHDAY (Years) (Years) 6 RESIDENCE 16 RESIDENCE 20 9320 WIDOWED 7 NUMBER OF 17 NUMBER OF WIDOWED MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF 21 NAME OF FATHER FATHER 12 MAIDEN NAME MAIDEN NAME OF MOTHER OF MOTHER (City or Town) according to law, this.... (Name of city or town) below Certificate issued .. (Day) (Month) (Year) City or Town Clerk or Registrar) 5193-g. Name of city (Year) Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) 00m-10-38 St., City or Town of Residence No.... Gulm ż 25 Certificate received by city or town clerk CITY OR TOWN CLERK OR REGISTRAR (Month) (Day) (Year)









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100m-10-38

Office of the SECRETARY Division of VITAL STATISTICS 1 PLACE OF MARRIAGE

The Commonwealth of Massachusetts

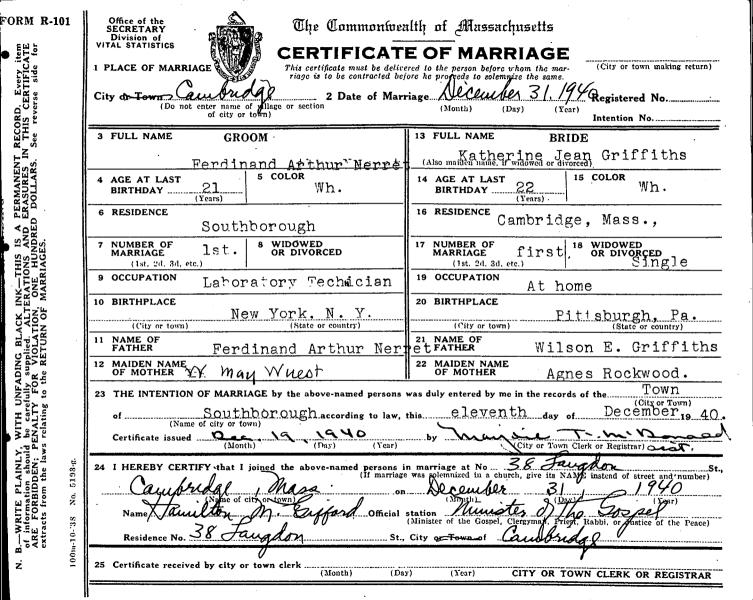
CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

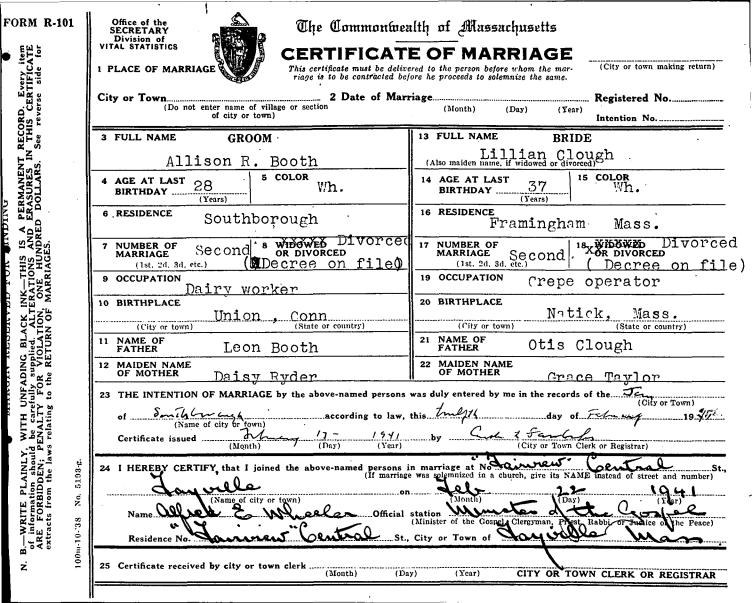
(City or town making return)

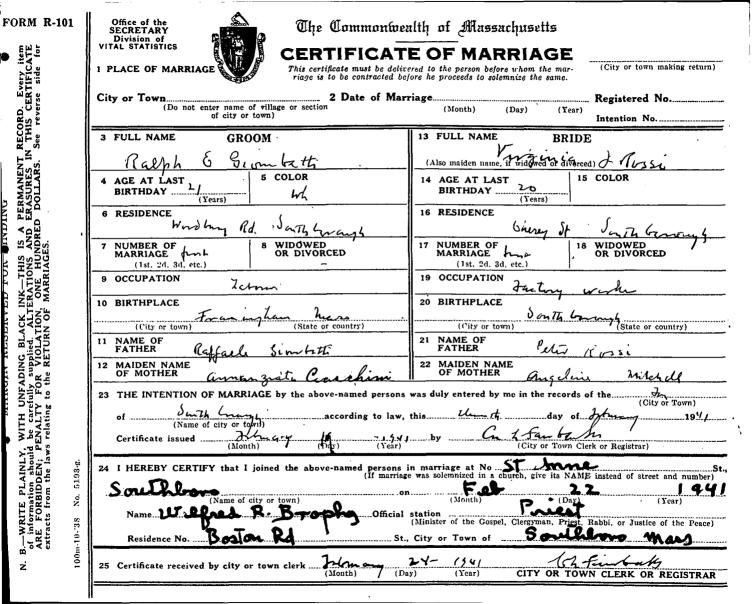
City or Town	(Month) (Day) (Year) Intention No.
3 FULL NAME GROOM	13 FULL NAME BRIDE
Henry & Mitchell	(Also maiden name, if widowed or divorced)
4 AGE AT LAST JS 5 COLOR BIRTHDAY (Years) 5 COLOR	14 AGE AT LAST 25 IS COLOR While
6 RESIDENCE July Pd. July brough	16 RESIDENCE Junjik Rd South Ground
7 NUMBER OF 2 1 8 WIDOWED OR DIVORCED (1st. 2d. 3d. etc.)	17 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED OR DIVORCED
9 OCCUPATION Trucking	19 OCCUPATION House Keeper
10 BIRTHPLACE Sinth Grand	20 BIRTHPLACE huten mass
(City or town) (State or country)	(City or town) (State or country)
11 NAME OF Louis Mithell	21 NAME OF FATHER Walker Brace
12 MAIDEN NAME OF MOTHER Warcells Candons	22 MAIDEN NAME OF MOTHER Italian Callahan
23 THE INTENTION OF MARRIAGE by the above-named persons of Junih Louigh according to law, (Name of city or town) Certificate issued Ambut 12 (Nay) (Month) (Pay) (Year)	this difih day of home for 19 10
24 I HEREBY CERTIFY that I joined the above-named persons i	n marriage at No St
Southboro mass on (Name of city or town)	(Month) (Day) (Year) station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
Name Wilfred R. Brophy Official	station (Minister of the Gospel, Clergynan, Priest, Rabbi, or Justice of the Peace)
Residence No	City or Town of Southborn mass
25 Certificate received by city or town clerk	21 - 1940 L'Afairbaile y) (Year) CITY OR TOWN CLERK OR REGISTRAR

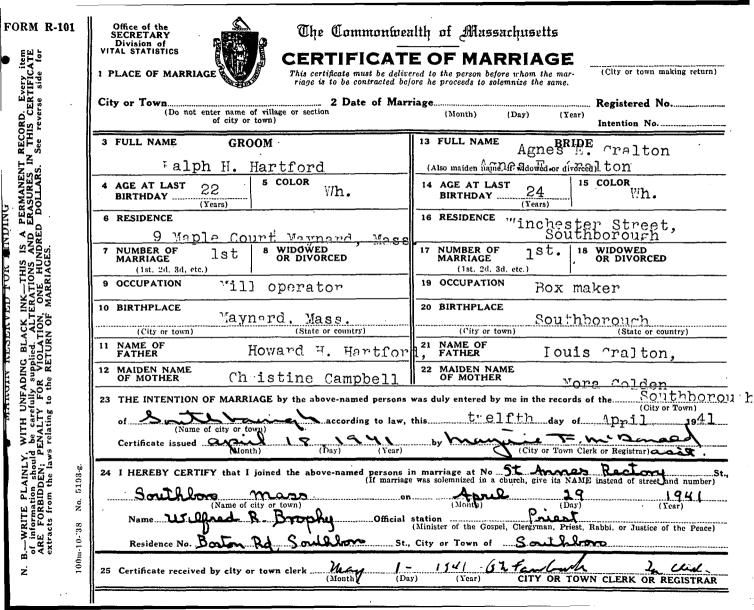
FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS 1 PLACE OF MARRIAGE (City or town making return) This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage..... Registered No..... (Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No. 13 FULL NAME 3 FULL NAME GROOM BRIDE Walkers (Also maiden name, if widowed or divorced 5 COLOR 4 AGE AT LAST 15 COLOR 14 AGE AT LAST 20 BIRTHDAY . (Years) 6 RESIDENCE 16 RESIDENCE 17 NUMBER OF MARRIAGE WIDOWED WIDOWED 7 NUMBER OF OR DIVORCED OR DIVORCED MARRIAGE (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.) 9 OCCUPATION 19 OCCUPATION Plum ber 10 BIRTHPLACE 20 BIRTHPLACE mass (State or country) (City or town) (State or country) (City or town 21 NAME OF 11 NAME OF FATHER FATHER 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the.......... (City or Town)according to law, this..... (Name of city or town) Certificate issued Qaca (Ny or Town Clerk or Registrar) (Month) (Day) (Year) 5193-g. Dec. $\sigma \nu \rho l$ (Month) eity or town) Official station 00m-10-38 (Minister of the Gospel, Clergyman, Priest, Rat St., City or Town of Deatho 174 25 Certificate received by city or town clerk CITY OR TOWN CLERK OR REGISTRAR (Month) (Day) (Year)

City or Town (Do not enter name of of city or to	village or section	Marriage(Month		Registered No	
3 FULL NAME GROO	3 FULL NAME GROOM		13 FULL NAME BRIDE Floring Deli Gregory (Green)		
g John Brusie		(Also maide			
4 AGE AT LAST BIRTHDAY (Years)	5 COLOR	14 AGE A BIRTH	T LAST DAY / / / (Years)	15 COLOR	
6 RESIDENCE		16 RESIDE	16 RESIDENCE		
11	nith har might			myta St. Workste	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	8 WIDOWED OR DIVORCED	17 NUMBE MARRI (1st		18 WIDOWED OR DIVORCED	
9 OCCUPATION Pales Provinces in		19 OCCUP	19 OCCUPATION Whoma		
10 BIRTHPLACE	10 BIRTHPLACE		PLACE CA	2.	
(City or town)	(City or town) (State or country)		(City or town) (State or country)		
11 NAME OF Charles B	11 NAME OF Charles Brusic		21 NAME OF FATHER Claring Sname		
12 MAIDEN NAME OF MOTHER Constina	22 MAIDE OF MO	22 MAIDEN NAME Vigrald & Benoit			
of Sath Long 5	according to			cords of the City or Town	
ii Certificate Issued	rub 7 -1	410 by	rule 2 Fai	bachs	
(Month)		rear)		own Clerk or Registrar)	
24 I HEREBY CERTIFY that I jo	ined the above-named per. (If n	sons in marriage a	in a church, give its	NAME instead of street and nu	
- Chipe of city	ye town)	on (Mon		(Day) (Year)	
Name	0.1112000000	ficial station	e Gospel, Clergyman,	Priest, Rabbi, or Justice of the	
Residence No. 268 Was	hington Blod.	(Minister of th	e Gospel, Clergyman,	Priest, Rabbi, or Justice of the	
Kesidence No.					









FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage Registered No...... (Do not enter name of village or section of city or town) Intention No..... 13 FULL NAME 3 FULL NAME GROOM · BRIDE (Also maiden name, if widowed or divorced) COLOR 15 COLOR 14 AGE AT LAST AGE AT LAST BIRTHDAY 6 RESIDENCE 16 RESIDENCE WIDOWED 17 NUMBER OF WIDOWED 7 NUMBER OF MARRIAGE OR DIVORCED MARRIAGE (1st. 2d. 3d. etc (1st. 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 21 NAME OF 11 NAME OF FATHER FATHER 22 MAIDEN NAME 12 MAIDEN NAME OF MOTHER QC OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the...... (City or Town) (Name of city or town) Certificate issued Nity or Town Clerk or Registrar) 5193-6. 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No ... (If marriage was solemnized in a church, give its NAME instead of street and number) St., City or Town of (Year) CITY OR TOWN CLERK OR REGISTRAR

5193-g 00m-10-38

	fice of CRETA	
D	ivision	of
VITAL	L STATI	STICS
1 PL	ACE O	F MARR
		2

3 FULL NAME

6 RESIDENCE

7 NUMBER OF

MARRIAGE

9 OCCUPATION

11 NAME OF **FATHER**

12 MAIDEN NAME

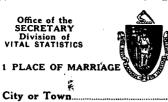
OF MOTHER

4 AGE AT LAST 2.

(1st, 2d, 3d, etc.)

(City or town)

BIRTHDAY



of city or town)

Gate Hills Road?

GROOM

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

riage is to be contracted before he proceeds to solemnize the same.

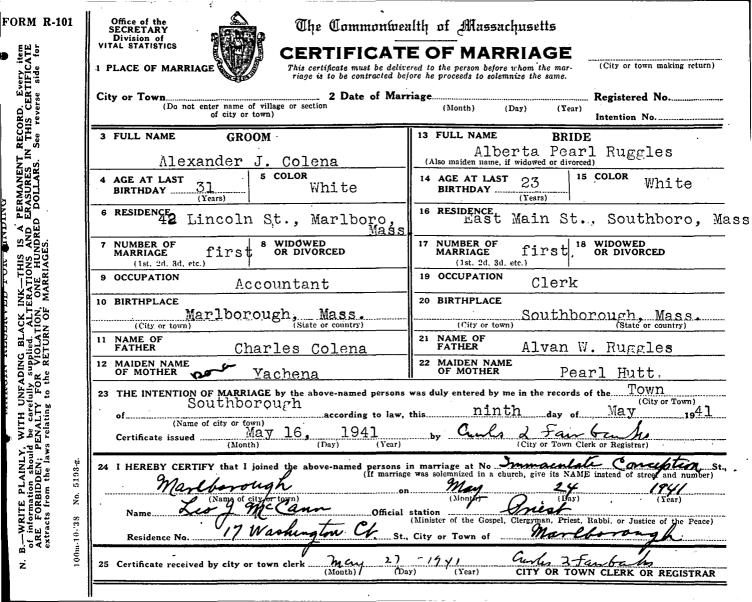
(City or town making return) This certificate must be delivered to the person before whom the mar-2 Date of Marriage..... Registered No..... (Do not enter name of village or section (Month) Intention No..... 13 FULL NAME BRIDE COLOR 15 COLOR 14 AGE AT LAST BIRTHDAY ... 16 RESIDENCE Smit Hidle WIDOWED 17 NUMBER OF WIDOWED OR DIVORCED MARRIAGE OR DIVORCED (1st. 2d. 3d. etc.) 19 OCCUPATION 20 BIRTHPLACE (City or town) (State or country) 21 NAME OF FATHER 22 MAIDEN NAME OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the according to law, this (City or Town Clerk or Registrar) O (Day) that I joined the above-named persons in marriage at No ... (If marriage was solemnized in a church, give its NAME instead of street and number)

(Name of city or town)

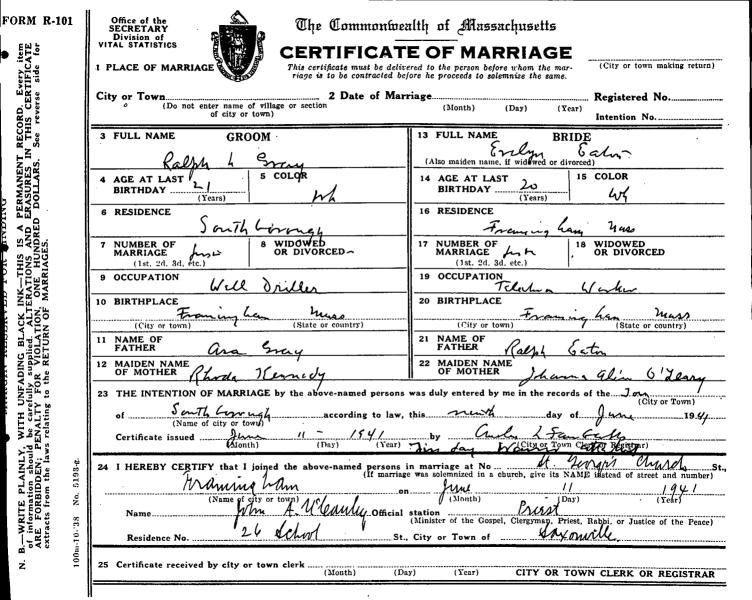
Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

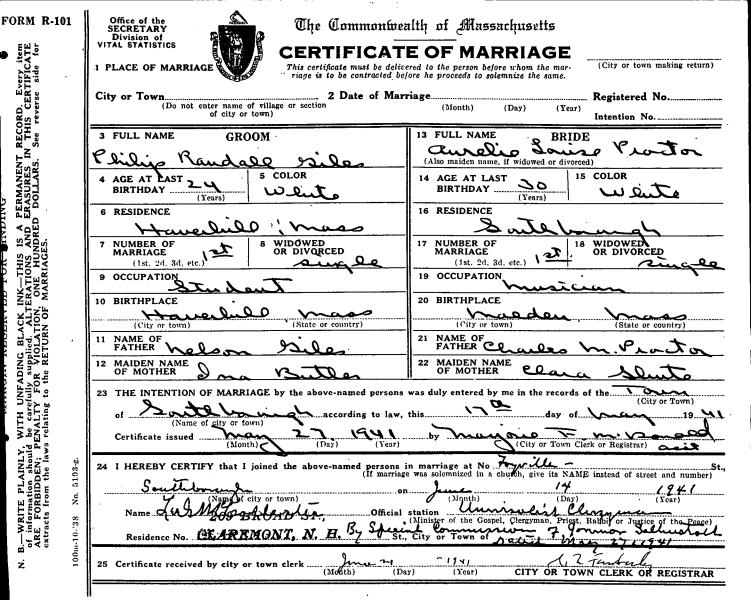
St., City or Town of Tanks

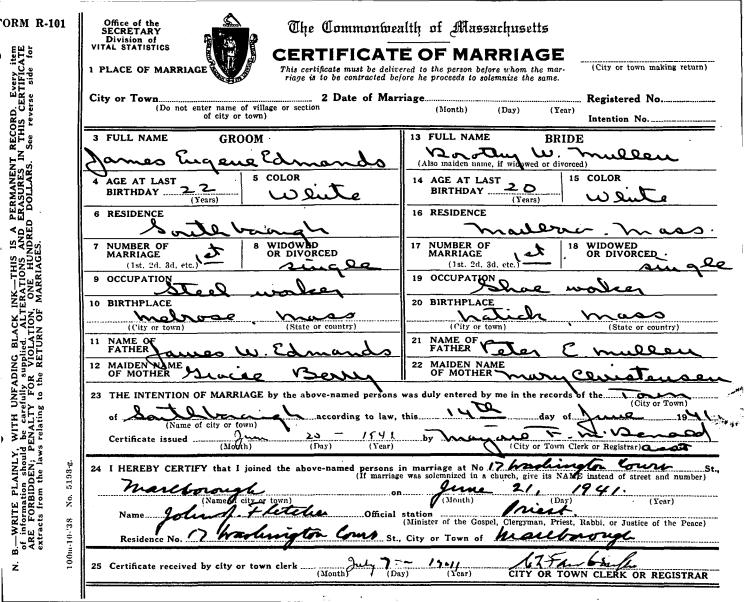
25 Certificate received by city or town clerk Way 17 / 54/ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR



ORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. City or Town 2 Date of Marriage..... Registered No..... (Do not enter name of village or section (Month) (Day) (Year) of city or town) Intention No. 13 FULL NAME 3 FULL NAME GROOM BRIDE mary (Also maiden name, if widowed or divorced) 5 COLOR 15 COLOR 4 AGE AT LAST > 14 AGE AT LAST BIRTHDAY BIRTHDAY (Years) (Years) 16 RESIDENCE 6 RESIDENCE WIDOWED 17 NUMBER OF 18 WIDOWED 7 NUMBER OF OR DIVORCED -MARRIAGE OR DIVORCED MARRIAGE (1st, 2d, 3d, etc.) (1st, 2d, 3d, etc.) 19 OCCUPATION OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town (City or town) (State or country) (State or country) 21 NAME OF 11 NAME OF FATHER **FATHER** 12 MAIDEN NAME MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (Name of city or town) (City or Town Clerk or Registrar) 5193-g. Š. (Month)Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) 00m-10-38 St., City or Town of mass. ż 25 Certificate received by city or town clerk ... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

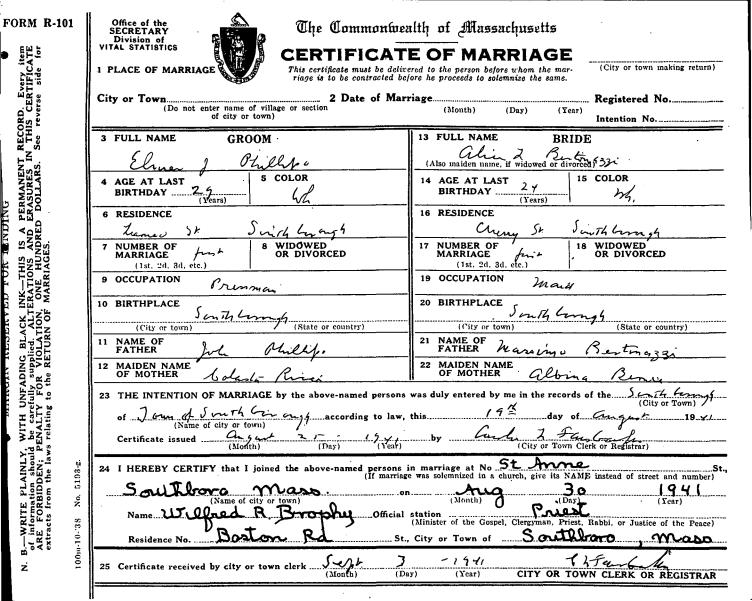


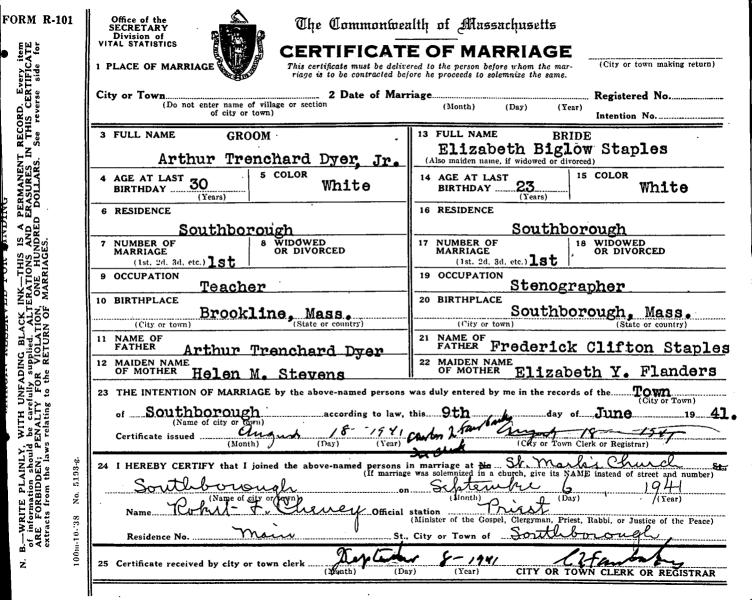




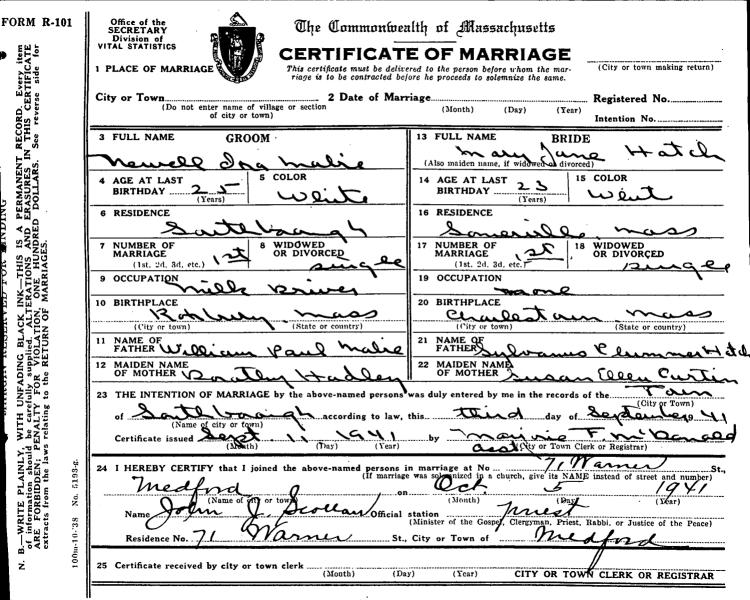


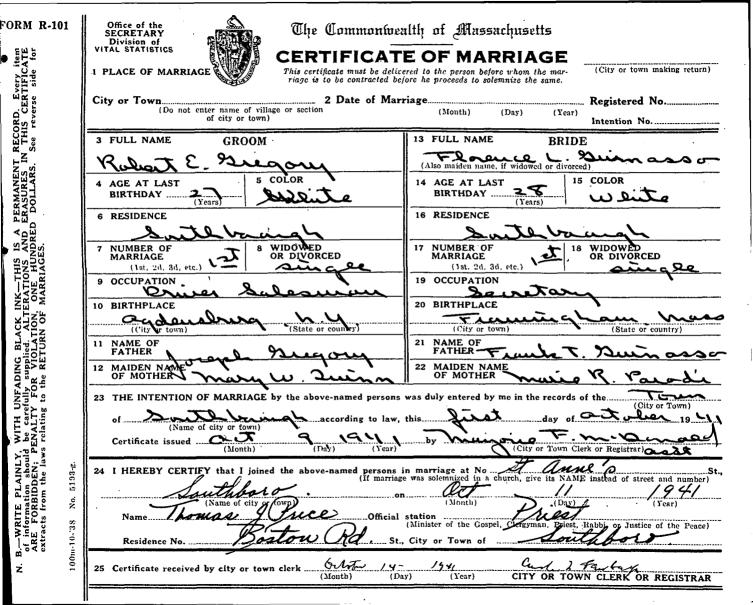
FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY CORD. Every item THIS CERTIFICATE e reverse side for Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE 1 PLACE OF MARRIAG (City or town making return) This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. City or Town 2 Date of Marriage..... Registered No. (Do not ter name of village or section (Month) (Day) (Year) of city or town) Intention No. 3 FULL NAME 13 FULL NAME BRIDE GROOM (Also maiden name, if widowed or divorced 15 COLOR AGE ATTAST 14 AGE AT LAST BIRTHDAY ____ BIRTHDAY (Years) (Years) PESIDENCE 16 RESIDENCE 168 Amad (n markhan WIDOWED 17 NUMBER OF 18 WIDOWED NUMBER OF OR DIVORCED OR DIVORCED MARRIAGE MARRIAGE (1st. 2d. 3d. etc.) (1st. 2d. 3d. etc.) 19 OCCUPATION OCCUPATION 20 BIRTHPLACE 10 BIRTHPLACE (City or town) (('ity or town) 21 NAME OF NAME OF FATHER FATHER MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHER 23 THŁ INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or Town) according to law, this Certificate is (Month) that I joined the above-named persons in marriage at No. (If marriage was solemaized in a church, give its NAME Month) 00m-10-38 Residence No. St., City or Town of 25 Certificate received by city or town clerk CITY OR TOWN CLERK OR REGISTRAR (Year)





FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriane is to be contracted before he proceeds to solemnize the same. City or Town 2 Date of Marriage Registered No. (Do not enter name of village or section (Month) of city or town) Intention No. 13 FULL NAME 3 FULL NAME GROOM BRIDE (Also maiden name, if widowed or divorced) 15 COLOR 14 AGE AT LAST 4 AGE AT LAST BIRTHDAY BIRTHDAY (Years) 16 RESIDENCE 6 RESIDENCE South hora 17 NUMBER OF WIDOWED 18 WIDOWED 7 NUMBER OF OR DIVORCED MARRIAGE OR DIVORCED MARRIAGE (1st. 2d. 3d. etc. (1st, 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION 20 BIRTHPLACE 10 BIRTHPLACE 21 NAME OF 11 NAME OF FATHER **FATHER** 22 MAIDEN NAME 12 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the...... according to law, this Sixteenth day of September (City or Town Clerk or Registrar) (Month) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No Th. Parsuage, State Iwad (If marriage was solemnized in a church, give its NAME instead of street and number) 5193-G (Name of city of march Official station home station Musicula The Forgles (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) St., City or Town of Box Grand LG-1941 CITY OR TOWN CLERK OR REGISTRAR 25 Certificate received by city or town clerk





	City or Town 2 Date of Ma	before he proceeds to solemnize the same. Arriage
	of city or town)	Intention No
	6 harles anthony Rossi	13 FULL NAME BRIDE Wargard Thurson Fuller (Also maiden hame, if widowed or divorced)
	4 AGE AT LAST 27 5 COLOR BIRTHDAY (Years)	14 AGE AT LAST DO 15 COLOR BIRTHDAY (Years)
	6 RESIDENCE South born with mass	16 RESIDENCE South Governgh Maso
	7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 8 WIDOWED OR DIVORCED	17 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED
	9 OCCUPATION Zatorer	19 OCCUPATION Telechron Operator
5	10 BIRTHPLACE South borough (City or town) (State or country)	20 BIRTHPLACE Transplan (City or town) (State or country)
5	11 NAME OF FATHER PATER	21 NAME OF ENGLA FULLER
a ve	12 MAIDEN NAME OF MOTHER Angeline Metchell	22 MAIDEN NAME OF MOTHER Margaset Mc Colinar
23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the of South Grand according to law, this fitenth day of Service (Name of city or fown) (Name of city or fown) Certificate issued (Month) (Pay) (Year) (City or Town Clerk or		v, this thenth day of September 19
e 1a₩s 3-6.		
No. 5193-6	Cordanlle	on Oct 11 194
00m-10-'38	Name	(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Pea

FORM R-101

Division of

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the mar-

of city or town) 3 FULL NAME GROOM	Intention No
Peter Derald Temmo	(Also maiden name, if widowed or divorced)
4 AGE AT LAST 2 5 COLOR BIRTHDAY (Years) 5 COLOR	14 AGE AT LAST 15 COLOR BIRTHDAY (Years)
6 RESIDENCE Middle Rd. Southbrains	16 RESIDENCE Rd - Sattlbrane
7 NUMBER OF MARRIAGE (1st, 2d, 8d, etc.) 8 WIDOWED OR DIVORCED	17 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED
9 OCCUPATION	19 OCCUPATION - Level
BIRTHPLACE	20 BIRTHPLACE
(City or town) (State or country)	(City or town) (State or country)
1 NAME OF COMMING FAMING	21 NAME OF James Suite
OF MOTHER	22 MAIDEN NAME OF MOTHER and dred Them
23 THE INTENTION OF MARRIAGE by the above-named person	ns was duly entered by me in the records of the
	o law, this twenty hithay of Lantin City or T
(Name of city or town)	To an a service as
Certificate Issued (Month) (Day)	(Year) by (Oil or Town Clerk or Registrar)
	arriage was solemnized in a church, give its KAME instead of street and nur
Hranighan	on October 12. 1941

100m (a)

Orlow 1941 25 Certificate received by city or town clerk.. (Month) (Dav) (Year) CITY OR TOWN CLERK OR REGISTRAR . Every item of Informa-ATE ARE FORBIDDEN; from the laws relating to

MARGIN RESERVED FOR BINDING

100m

The Commonwealth of Massachusetts

Office of the SECRETARY Division of VITAL STATISTICS 1 PLACE OF MARRIAGE	
	4300

CERTIFICATE OF MARRIAGE This certificate must be delivered to the person before whom the mar-riage is to be contracted before he proceeds to solemnize the same. (City or town making return)

City or Town	arriage
of city or town)	Intention No.
3 FULL NAME GROOM	(Also maiden name, if widowed or divorced)
4 AGE AT LAST VS 5 COLOR BIRTHDAY (Years) 5 COLOR	14 AGE AT LAST SIRTHDAY (Years) 15 COLOR
6 RESIDENCE South Langh	16 RESIDENCE
7 NUMBER OF MARRIAGE (1st, 2d, 8d, etc.) 8 WIDOWED OR DIVORCED	17 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED
9 OCCUPATION Railroad Lubrace	19 OCCUPATION
(City or town) (State or country)	20 BIRTHPLACE (City or town) (State or country)
11 NAME OF FATHER PACIFIC TO TO WAS A STATE OF THE PACIFIC OF THE	21 NAME OF FATHER Losersh walla
12 MAIDEN NAME OF MOTHER Palmina Brunetti	22 MAIDEN NAME OF MOTHER Ceiper
(Name of city or town)	this day of a tale (City or Town
Certificate Issued October 2 4- 19. (Nouth) (Day) (Yea	Dy
	was solemuized in a church, give its NAME instead of street and number on
Name of city or town Price Office	(Month) (Year) lal station Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace
Residence No. Boston Rd.	St. City or Town of

(Dav)

(Year)

CITY OR TOWN CLERK OR REGISTRAR

BINDING

1 PLACE OF MARRIAGE

Office of the SECRETARY Division of

VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the mar-

(City or town making return)

(Do not enter name of village or section of city or town)	Marriage
FULL NAME GROOM Creat J. Wyckati an	13 FULL NAME BRIDE (Also maiden name, if widowed or divorced)
4 AGE AT LAST 2 5 COLOR BIRTHDAY (Years) 5 COLOR	14 AGE AT LAST 2 9 15 COLOR BIRTHDAY (Years) Usit
6 RESIDENCE	16 RESIDENCE 35 Dleas m to . mallow
7 NUMBER OF MARRIAGE (1st, 2d, 8d, etc.) 8 WIDOWED OR DIVORCED	17 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED
9 OCCUPATION 10 BIRTHPLACE	19 OCCUPATION 20 BIRTHPLACE
(City or town) (State or country)	(City or town) (State or country)
12 MAIDEN NAME	21 NAME OF Vide Vocable 22 MAIDEN NAME
23 THE INTENTION OF MARRIAGE by the above-named persons we	OF MOTHER Cuestino Danner
(Name of city or town)	day of Clar Town Clerk or Registrar)
multon	on Neverthan 15 1941
NameOff	(Month) (Day) (Year) ficial station

1	PLACE OF MARRIAGE This certificate must be delive	E OF MARRIAGE ered to the person before whom the mar- fore he proceeds to solemnize the same. (City or town making
C	(Do not enter name of village or section of city or town)	riage Registered No (Month) (Day) (Year) Intention No
3	FULL NAME GROOM Garlton It Jackman	13 FULL NAME BRIDE Stille Gles. (Also maiden name, if widowed or divorced)
4	AGE AT LAST BIRTHDAY (Years) 5 COLOR	14 AGE AT LAST LO IS COLOR BIRTHDAY (Years) 15 COLOR
	NUMBER OF 1 8 WIDOWED	16 RESIDENCE Canton H
	NUMBER OF AND NUMBER OF OR DIVORCED — (1st. 2d. 3d, etc.)	17 NUMBER OF MARRIAGE (1st. 2d, 3d, etc.)
3	OCCUPATION Boiler Maker	19 OCCUPATION Sam , tress
10	O BIRTHPLACE Wasner (City or town) (State or country)	20 BIRTHPLACE New Sustant Mass (City or town) (State or country)
11	NAME OF GENERAL YORK MAN	21 NAME OF Julien Oles
12	OF MOTHER DENISE C. Degl nam	22 MAIDEN NAME OF MOTHER Courant La Jacon
2	of South Corry 4 according to law,	this filenth day of home ker
	Certificate issued (Month) (Pay) (Year)	by Civil Town Clerk or Registrar)
2	A -4-4 0 0	e was solemnized in a church, give its NAME instead of street and n
	Name Robert F. Chency Official Residence No. Main St.	(Month) (Day) (Year) station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the City or Town of Southborough

RESERVED FOR BINDING

SECRETARY
Division of
VITAL STATISTICS



The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

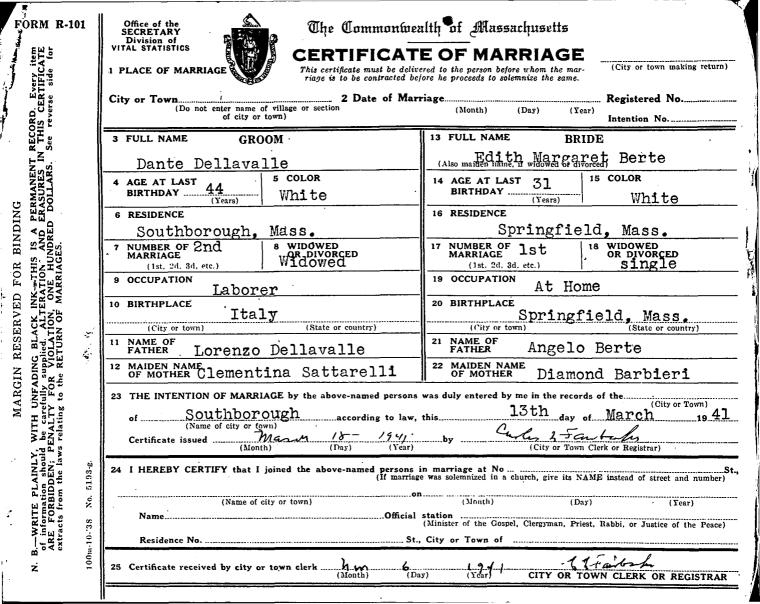
. 1 PLACE OF MARRIAGE This certificate must be deliveriage is to be contracted be	rered to the person before whom the mar- fore he proceeds to solemnize the same. (City or town making return)
City or Town	arriage
Julia Joseph Rangi	(Also maiden name, if widowed or divorced)
4 AGE AT LAST 2 5 COLOR BIRTHDAY (Years) 5 COLOR	14 AGE AT LAST 15 COLOR BIRTHDAY RECYCLOR RECYCLOR STORE RECYCLOR
6 RESIDENCE 12 main St. malloac	16 RESPENCE
7 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED	17 NUMBER OF MARRIAGE OR DIVORCED OR DIVORCED
9 OCCUPATION re repairing	19 OCCUPATION Los wolson
(City or town) (State or country)	20 BIRTHPLACE (City or town) (State or country)
11 NAME OF REACT REACT	21 NAME OF FATHER OUT TO Some bett
12 MAIDEN NAME OF MOTHER SOLICE BUCCACI	22 MAIDEN NAME OF MOTHER
of	this 3 3 day of City or Town)
Name Wilfred R. Brophy Office	marriage at No. St. Marria
25 Certificate received by city or town clerk	Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

100m (a)-1-41-4667

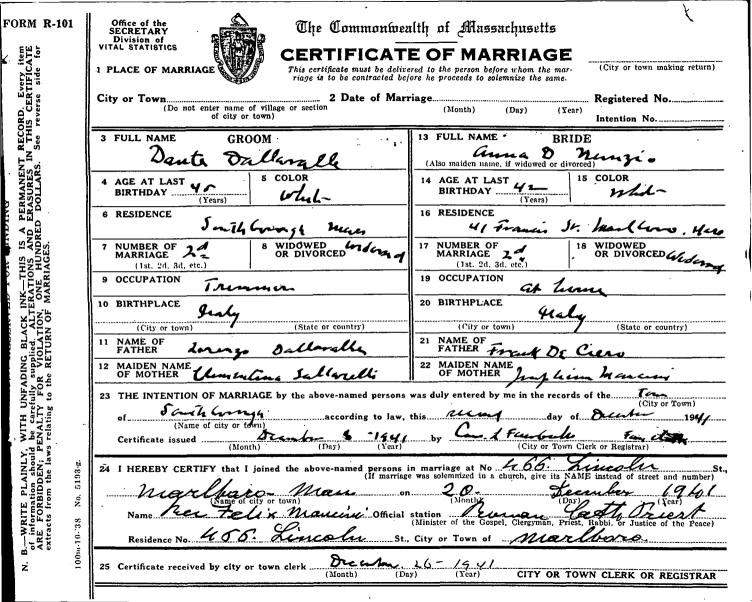
FORM R-101 The Commonwealth of Massachusetts Office of the SECRETARY Division of IFICATE OF MARRIAGE VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the mar-(City or town making return) riage is to be contracted before he proceeds to solemnize the same. ...Registered No. (Do not enter name of village of section (Month) of city or town) Intention No. GROOM FULL NAME 3 FULL NAME BRIDE (Also maiden name, if widowed r divorced) AGE AT LAST COLOR 14 AGE AT LAST 15 COLOR BIRTHDAY BIRTHDAY (Years) (Years) 16 RESIDENCE 6 RESIDENCE NUMBER OF WIDOWED 17 NUMBER OF WIDOWED OR DIVORCE MARRIAGE MARRIAGE OR DIVORCED (1st, 2d, 8d, etc.) (1st. 2d. 3d. etc.) OCCUPATION 9 OCCUPATION BIRTHPLACE 10 BIRTHPLACE (State or country) (City or town) (City or town) (State or country) 11 NAME OF NAME OF FATHER 12 MAIDEN NAME MAIDEN NAME OF MOTHER OF MOTHER-OF MARRIAGE by the above-named persons was duly entered by me in the records of (City or Town) (Name of city or town) Certificate Issued (Day) (Month) (Year) City or Town Clerk or Registrar) persons in marriage at Ita 24 | HEREBY CERTIFY that I joined the above-named If marriage was solemujzed in a church NAME instead of street and number) (Month) (Year) (a)-1-41-4667 Official station (Minister of the Gospet Clergy Rabbi, or Justice of the Peace)St.. City or Town of 25 Certificate received by city or town clerk...... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101 Office of the The Commonwealth of Massachusetts SECRETARY Division of VITAL STATISTICS CERTIFICATE OF MARRIAGE (City or town making return) 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same. City or Town 2 Date of Marriage Registered No. (Do not enter name of village or section of city or town) Intention No. 13 FULL NAME 3 FULL NAME GROOM · BRIDE (Also maiden name, if widowed or divorced) 15 COLOR 14 AGE AT LAST 4 AGE AT LAST 6 RESIDENCE 16 RESIDENCE South Comp 17 NUMBER OF WIDOWED 18 WIDOWED 7 NUMBER OF OR DIVORCED ~ OR DIVORCED MARRIAGE (1st. 2d. 3d. etc.) (1st, 2d, 3d, etc.) 19 OCCUPATION 9 OCCUPATION 20 BIRTHPLACE 10 BIRTHPLACE 21 NAME OF 11 NAME OF FATHER FATHER 22 MAIDEN NAME OF MOTHER 12 MAIDEN NAME OF MOTHER 14 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the........ (Name of city or town) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Anne Dectors (If marriage was solemnized in a church, give its NAME instead of street and number) (Name of city or town) On (Month) (Day) Name of city or town)

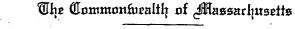
Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) Residence No. Boston Rd St., City or Town of Southborn Mass 25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR



FORM R-101 The Commonwealth of Massachusetts Office of the SECRETARY Division of CERTIFICATE OF MARRIAGE VITAL STATISTICS 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the mar-(City or town making return) riage is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage.....Registered No. (Do not enter name of village or section (Month) (Day) of city or town) Intention No. 13 FULL NAME 3 FULL NAME GROOM .BRIDE (Also maiden name, if widowed or divorced) 5 COLOR 4 AGE AT LAST 14 AGE AT LAST 15 COLOR BIRTHDAY BIRTHDAY Whil-(Years) (Years) 16 RESIDENCE 6 RESIDENCE Ville South borong nova 8 WIDOWED 7 NUMBER OF 17 NUMBER OF WIDOWED MARRIAGE OR DIVORCED MARRIAGE OR DIVORCED (1st. 2d. 8d. etc.) (1st. 2d. 3d. etc.) 9 OCCUPATION 19 OCCUPATION 20 BIRTHPLACE 10 BIRTHPLACE (City or town) 21 NAME OF 11 NAME OF William FATHER FATHER 22 MAIDEN NAME 12 MAIDEN NAME OF MOTHER OF MOTHER 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Certificate Issued or Town Clerk or Registrar) 24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. S.T. No. 12 Company (If marriage was solemuized in a church, give its NAME instead of street and number) (Name of city or town) (Month) Official station (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace) City or Town of Concord h. 11 -- 1941 25 Certificate received by city or town clerk (Month) (Dav) (Year) CITY OR TOWN CLERK OR REGISTRAR



Office of the SECRETARY Division of VITAL STATISTICS PLACE OF MARRIAGE



(City or town making return)

CITY OR TOWN CLERK OR REGISTRAR

This certificate must be delivered to the person before whom the mar-riage is to be contracted before he proceeds to solemnize the same.

City or Town	rriage
Francis W White	(Also maiden name, if widowed or divorced)
4 AGE AT LAST 3 9 5 COLOR BIRTHDAY (Years) 5 COLOR	14 AGE AT LAST 2 15 COLOR BIRTHDAY (Years) Phel-
6 RESIDENCE horith borough	South brough
7 NUMBER OF MARRIAGE (1st, 2d, 8d, etc.) 8 WIDOWED OR DIVORCED Diror case Occurs attacked Tom	17 NUMBER OF AND 18 WIDOWED OR DIVORCED OR DIVORCED
9 OCCUPATION Carkente	19 OCCUPATION Factory Worker
10 BIRTHPLACE (City or town) (State or country)	20 BIRTHPLACE 1 2 2 5 1 5 (City or towh) (State or country)
11 NAME OF Edmand & White	21 NAME OF Lengan Itual
12 MAIDEN NAME OF MOTHER Mannin F Johnson	22 MAIDEN NAME OF MOTHER VILL Cook
(Name of city or town)	this by tenth day of transfer 1941
TAL OF REALER	was sorgimized in a cupicit, give its Maste instead of street and number i
Residence No. Maple St S	it. City or Town of Breket many
25 Certificate received by city or town clerk (Month)	

100m (a)-1-41-4667

FORM R-101 The Commonwealth of Massachusetts Office of the SECRETARY Division of CERTIFICATE OF MARRIAGE VITAL STATISTICS y item of informa-ARE FORBIDDEN; he laws relating to 1 PLACE OF MARRIAGE This certificate must be delivered to the person before whom the mar-(City or town making return) riage is to be contracted before he proceeds to solemnize the same. 2 Date of Marriage..... Registered No. (Do not enter name of village or section (Month) (Dav) (Year) of city or town) Intention No. 3 FULL NAME GROOM 13 FULL NAME BRIDE if widowed or divorced (Also maiden name. 5 COLOR 4 AGE AT LAST 14 AGE AT LAST 15 COLOR BIRTHDAY BIRTHDAY (Years) (Years) 16 RESIDENCE 6 RESIDENCE WIDOWED 7 NUMBER OF 17 NUMBER OF WIDOWED 18 OR DIVORCED MARRIAGE MARRIAGE OR DIVORCED (1st, 2d, 8d, etc.) (1st, 2d, 3d, etc.) 9 OCCUPATION OCCUPATION 10 BIRTHPLACE 20 BIRTHPLACE (City or town) (State or country) (City or town) (State or country) 11 NAME OF 21 NAME OF **FATHER** FATHER \ 12 MAIDEN NAME 22 MAIDEN NAME OF MOTHER OF MOTHEN 23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by meaccording to law, this (Name of city or town) Certificate Issued (Day) (Year) Town Clerk or Registrar) (Month) 24 | HEREBY CERTIFY that I joined the above-named persons in marriage at No. (If marriage was solemnized in a church AME instead of street and number) (Month) (a)-1-41-4667 Official station (Minister of the Gospel, Clergyman, Priest, St., City or . Town- of Residence No. 100m 25 Certificate received by city or town clerk. (Month) (Day) CITY OR TOWN CLERK OR REGISTRAR